

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Blue Cross Blue Shield of Michigan PAC

ADDRESS (number and street)

602 W. Ionia

☐Check if different
than previously
reported. (ACC)

Lansing

MI

48933

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00084061

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mark Cook

Signature of Treasurer

Electronically Filed by Mark Cook

Date

07

29

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Blue Cross Blue Shield of Michigan PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	<div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>2011</div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><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☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Blue Cross Blue Shield of Michigan PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	155567.00	155567.00
(ii) Unitemized	131949.77	131949.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)	287516.77	287516.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	287516.77	287516.77
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	644.70	644.70
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	289161.47	289161.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	289161.47	289161.47

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	63500.00	63500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	196718.19	196718.19	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	260218.19	260218.19	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	260218.19	260218.19	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	287516.77	287516.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	287516.77	287516.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Keith Adkins

Mailing Address 4371 Fieldview

City

Grand Ledge

State

MI

Zip Code

48837-8191

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP, Marketing

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE9418F809F28467E903

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Peter Albert

Mailing Address 30711 Delton

City

Madison Heights

State

MI

Zip Code

48071-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A094244D000194ED7833

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kathy Alden

Mailing Address 2409 Kensington

City

Lansing

State

MI

Zip Code

48910-2854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1DB5D24060BF4F8F878

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

963.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Tina Allen

Mailing Address 12243 CAMDEN

City

Livonia

State

MI

Zip Code

48150-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6D41C070A42D41EA9C1

Amount of Each Receipt this Period

261.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Michael Allie

Mailing Address 25603 Arcadia Dr

City

Novi

State

MI

Zip Code

48374-2440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD398A3D39CAC4AFCBFF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Gregory Anderson

Mailing Address 37161 Chesapeake

City

Farmington Hills

State

MI

Zip Code

48335-1142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Corp & Financial Invst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC1E31B15090B4739B8B

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1223.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Karen Anderson

Mailing Address 47610 Red Run Dr

City

Canton

State

MI

Zip Code

48187-5490

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Mgr- Employee & Labor Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA9A0166015B245E4AA5

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Todd Anderson

Mailing Address 10653 Corkery Ln

City

Grand Ledge

State

MI

Zip Code

48837-9522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3FBD46E02F54485EAB4

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Joseph Andraska

Mailing Address 2220 Tilsby Ct

City

Ann Arbor

State

MI

Zip Code

48103-6160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Mgr Finance/accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE6486D399DE44EC7AF2

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Margaret Anthony

Mailing Address 4451 Golfview Dr

City

Brighton

State

MI

Zip Code

48116-9186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A581839650D05447A948

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Ronald Arambula

Mailing Address 2020 Palmer Dr

City

Wixom

State

MI

Zip Code

48393-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5553B4E1D3B04B18969

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Brian Armstrong

Mailing Address 1363 North Creek Dr

City

Wixom

State

MI

Zip Code

48393-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
VP Group Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0D690B723D614671BCF

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Anthony Asciutto

Mailing Address 505 Lakes Edge Drive

City

Oxford

State

MI

Zip Code

48371-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4B3C05E8AA64481F8AB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jenalyn Astorga

Mailing Address 27820 White Plns

City

Farmington Hills

State

MI

Zip Code

48331-3247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A691399E8B26E4F5093A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Richard Baharozian

Mailing Address 2525 Farm Brook Trail

City

Oxford

State

MI

Zip Code

48370-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE5DCF024B1084A229CE

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ann Baker

Mailing Address 1153 Nottingham

City

Grosse Pointe Park

State

MI

Zip Code

48230-1339

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Sr Dir WCM and Health Prmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF06ADB513F5B46ED9FB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Deanna Baker

Mailing Address 5680 Farley Road

City

Clarkston

State

MI

Zip Code

48346-1739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Analyst-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A801EC086D518435CB96

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Susan Barkell

Mailing Address 8171 Brookville Rd

City

Plymouth

State

MI

Zip Code

48170-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

SVP Health Care Value

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB0C7994B88D747CB9B4

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jacqueline Barker

Mailing Address 4036 Chablis St

City

West Bloomfield

State

MI

Zip Code

48323-3027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

HCV Bus Sgmnt Consult

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABDFB00AC67ED46BBA67

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

David Barnes

Mailing Address 4334 Vernor Ct

City

Bloomfield Hills

State

MI

Zip Code

48302-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE3EF4C4C5981429289D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Linda Barnes

Mailing Address 697 West Lansing Road

City

Morrice

State

MI

Zip Code

48857-9649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

VP, Service Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A40D28C2D40394EEFB56

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1106.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kurt Barr

Mailing Address 991 N Oxford Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1859

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7F8BB1885DC84E2E81B

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Mark Bartlett

Mailing Address 49546 Hollywood Dr

City

Canton

State

MI

Zip Code

48187-1162

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Evp CFO & Pres Emerg Mkts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A255D619C2A68419A8E0

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Patricia Batoha

Mailing Address 3172 Sandoval Dr

City

Lake Orion

State

MI

Zip Code

48360-1547

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A093B28FD307643B0AE1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1391.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan Bayless

Mailing Address 4722 Heather Ln

City

Bloomfield Hills

State

MI

Zip Code

48301-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A76D3E6F231934EA9AE4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Donald Bearden

Mailing Address 1414 Wellington Road

City

Lansing

State

MI

Zip Code

48910-1156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Corporate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2A5900A5CBBA40318B0

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Corrie Beaverson

Mailing Address 12219 Landers Dr

City

Plymouth

State

MI

Zip Code

48170-3549

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Lead HR Bus Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFA3346038501452EA27

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

787.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Rodester Begosa

Mailing Address 34270 Trillium Court

City

Livonia

State

MI

Zip Code

48150-3689

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AAC46096C4A9D49BB8CF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Nancy Bennett

Mailing Address 24121 Rosewood

City

Oak Park

State

MI

Zip Code

48237-2271

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7BA2DBEE74364448B6B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Michael Benoit

Mailing Address 34921 25 Mile Road

City

Chesterfield

State

MI

Zip Code

48047-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE7FBD56D17314BA5B4A

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Beth Benson

Mailing Address 15860 Reedmere Ave

City

Beverly Hills

State

MI

Zip Code

48025-5672

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A30247CC9448B466B902

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Philip Berry

Mailing Address 31365 Coachlight Ln

City

Bingham Farms

State

MI

Zip Code

48025-4403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Sr. Director - Lean

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A22BC4F4E37B84E1D9C5

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Michelle Billingsley

Mailing Address 878 Saint Clair St

City

Grosse Pointe

State

MI

Zip Code

48230-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Bus Intell & IT Delivr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB1CAE33F5DD44CD6BBB

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Laurence Binder

Mailing Address 32300 Maryland

City

Livonia

State

MI

Zip Code

48150-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1641EAD4FBC04F6BA78

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Emma Bissonnette

Mailing Address 32417 Desmond

City

Warren

State

MI

Zip Code

48093-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5AE8272AAD704DECB91

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kenneth Bluhm

Mailing Address 6187 Brittany Tree

City

Troy

State

MI

Zip Code

48085-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A83BB4D5136DF407C8B7

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Bobak

Mailing Address 7199 Quail Run St

City

State

Zip Code

Temperance

MI

48182-1363

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A159C95228112444BBB7

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kimberlie Bodner

Mailing Address 8239 Horsemill Rd

City

State

Zip Code

Grosse Ile

MI

48138-1163

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A94FA5FBC16A84E22AE3

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Patricia Bojicic

Mailing Address 29223 Glencastle Court

City

State

Zip Code

Farmington Hills

MI

48336-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC959D589E28040569A2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Bojman

Mailing Address 15971 Jeanette

City

Southfield

State

MI

Zip Code

48075-2012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A07DF0852E773469CBC3

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Thomas Borgula

Mailing Address 35831 Candlewood

City

Sterling Heights

State

MI

Zip Code

48312-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A87381AB8013242EF8C9

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Sheila Brake

Mailing Address 7782 Forestview Drive

City

Haslett

State

MI

Zip Code

48840-8720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation
Director, Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8F9028F42A4646D6B02

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

930.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Pamela Braund

Mailing Address 121E Parent Ave

City

Royal Oak

State

MI

Zip Code

48067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2BA9F763350642C5AD9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Diane Bridgeman

Mailing Address 687 Chestnut Dr

City

Wixom

State

MI

Zip Code

48393-4304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir Clinical Program Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A11795E4E13EC43AB81B

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

James Bridges

Mailing Address P.O. Box 2252

City

Southfield

State

MI

Zip Code

48037-2252

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4FB7F79FEFE945EE9E0

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Philip Briskin

Mailing Address 523 Wilcox St

City

Rochester

State

MI

Zip Code

48307-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFD314C3A6CDF4D10869

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Luzine Brister

Mailing Address 17145 Strathmoor

City

Detroit

State

MI

Zip Code

48235-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC27DE7569DC34A1BB0B

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Michael Britt

Mailing Address 5439 Timberbend Drive

City

Brighton

State

MI

Zip Code

48116-4796

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

President Af Ins Co Of America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD3D72B30F80C4FE6A84

Amount of Each Receipt this Period

660.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1271.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sharon Brock

Mailing Address 39542 Dorchester Cir

City

Canton

State

MI

Zip Code

48188-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A80120F6F4AC643E7B4C

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Barbara Brown-Cadovich

Mailing Address 356 Falling Brook Dr

City

Troy

State

MI

Zip Code

48098-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

HCV Bus Sgmnt Consult

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A39D0464084654C349D3

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

David Brown

Mailing Address 551 Plymouth Ave SE

City

Grand Rapids

State

MI

Zip Code

49506-2841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF4B820F5B9254D9396D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Teresa Bueche

Mailing Address 7144 Shalimar Dr NE

City

Comstock Park

State

MI

Zip Code

49321-9644

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A907CA7AEEDF3415A94E

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

David Bulmer

Mailing Address 11321 Morgan Street

City

Plymouth

State

MI

Zip Code

48170-4436

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Technology Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8036CE994AE944BCAA3

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Bethany Bump-White

Mailing Address 31634 Iris Ct

City

Rockwood

State

MI

Zip Code

48173-8766

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Corp Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABA7F787D8F28436FBEB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Miriam Burch

Mailing Address 21985 Ember Ct

City

Grosse Ile

State

MI

Zip Code

48138-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: ADB41DEE4EF644AE3A52

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Richard Burgess

Mailing Address 5163 Springdale Ct

City

Clarkston

State

MI

Zip Code

48348-5039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AE68A76A8E9BF4C97BCE

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Terrence Burke

Mailing Address 2417 E Canada Dr

City

Bloomington

State

IN

Zip Code

47401-8641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
VP Individual Business Unit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A1FB3D56A65D04B0C8CF

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jennifer Bussone

Mailing Address 28121 Forestbrook Dr

City

Farmington Hills

State

MI

Zip Code

48334-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Ecv Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3C726D461E64410ABAD

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Laura Byars

Mailing Address 5067 Maceri Circle

City

Sterling Heights

State

MI

Zip Code

48314-4076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Sr Dir Human Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD3BBC99D45EF4C77ADD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Tonya Byers

Mailing Address 10331 Dartmouth

City

Oak Park

State

MI

Zip Code

48237-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB43B533695984952BB9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Alan Byrnes

Mailing Address 15063 Lakewood Dr

City

Plymouth

State

MI

Zip Code

48170-2679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1739BF59DE834542B86

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Thelma Caison-Sorey

Mailing Address 4253 Sedgemoor Lane

City

Bloomfield Hills

State

MI

Zip Code

48302-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A03F306504F4141F0ABD

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Diane Cantara

Mailing Address 2710 Seymour Lk Rd

City

Oxford

State

MI

Zip Code

48371-4238

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3D6AB195AAD14DB19FA

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Matthew Case

Mailing Address 9370 Big Hand Rd

City

Columbus

State

MI

Zip Code

48063-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A1DD800B60ED04518877

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

David Casillas

Mailing Address 3020 Syracuse

City

Dearborn

State

MI

Zip Code

48124-4527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AB720877C16854B348E5

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Douglas Cedras

Mailing Address 2616 McClintock

City

Bloomfield Hills

State

MI

Zip Code

48302-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A8912F6111E5749A1AAA

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Diane Cesarz

Mailing Address 18525 Shadyside St

City

Livonia

State

MI

Zip Code

48152-3245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A7DC79F06437D44969A7

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Carla Chambers

Mailing Address 39660 Dun Rovin Dr

City

Northville

State

MI

Zip Code

48168-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Hlth & Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A5D7B253809714BDD8CC

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Susan Christensen

Mailing Address 2105 Brockton Ave

City

Royal Oak

State

MI

Zip Code

48067-3569

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Consultant - Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AF84F8F45251C42EDB69

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Phillip Churchill Jr

Mailing Address 3026 Westchester Rd

City

Lansing

State

MI

Zip Code

48911-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A362497752BCC4BE89F9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

John Colaluca

Mailing Address 33657 Chatsworth Dr

City

Sterling Heights

State

MI

Zip Code

48312-6012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AACEDB06449B84E198DD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Cassandra Coleman

Mailing Address 41677 Bedford Dr

City

Canton

State

MI

Zip Code

48187-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF755CE7AC88A47ADA02

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Allison Combs

Mailing Address 4122 Willow Pond Dr

City

Ypsilanti

State

MI

Zip Code

48197-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A91595D517E124328ACF

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jeffrey Connolly

Mailing Address 3650 Bluff Ridge Rd

City

Traverse City

State

MI

Zip Code

49686-8648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Bcbm&pres W Mi Ops&mngd Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0BEDFC3D724C476DADC

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Mark Cook

Mailing Address 1121 Lone Oak Dr

City

Mason

State

MI

Zip Code

48854-8714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Governmental Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A368E8D6306824DD881D

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1599.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Cook

Mailing Address 28140 Kendallwood Dr

City

Farmington Hills

State

MI

Zip Code

48334-3454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0BAEB17A3F73433F81F

Amount of Each Receipt this Period

174.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Renee Cords

Mailing Address 16001 Riverside ST

City

Livonia

State

MI

Zip Code

48154-2460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Strategic Anal Prjt Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A381E6833851E4806B7A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Seth Crawford

Mailing Address 28736 Stonewall Court

City

Novi

State

MI

Zip Code

48377-2720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Underwriting & Actural Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC9487AFFC7834FD081A

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

993.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan Crowley

Mailing Address 31 Beacon Hill

City

Grosse Pointe Farm

State

MI

Zip Code

48236-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A677AC2DA35004B7D90B

Amount of Each Receipt this Period

455.00

Payroll Deduction: \$35.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Lisa Crozier

Mailing Address 7269 Pine Vista

City

Brighton

State

MI

Zip Code

48116-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation
VP, Claims & Med Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8598DA6ABDCE46E791E

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kenneth Dallafior

Mailing Address 188 Four Seasons Dr

City

Lake Orion

State

MI

Zip Code

48360-2645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Svp Grp Sls & Corp Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A30F8FB623BB647058DF

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Daly

Mailing Address 3299 Jasper Ct

City

Troy

State

MI

Zip Code

48083-5780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC4733E7BAD864F8B82C

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Laura Dancsok

Mailing Address 8253 Colony Dr
#22

City

Grosse Ile

State

MI

Zip Code

48138-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9647E130A4DF44AF915

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Douglas Darland

Mailing Address 529 Burtman

City

Troy

State

MI

Zip Code

48083-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 1

Transaction ID: A192970D8262E4EBDBA1

Amount of Each Receipt this Period

348.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

816.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joseph David

Mailing Address 345 Troon Lane

City

Canton

State

MI

Zip Code

48188-3098

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF2A7F9560B5543139F9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jeffrey Denhard

Mailing Address 5644 Cliffside Drive

City

Troy

State

MI

Zip Code

48085-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A27D45D325CB642E4A2B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Barbara Derian

Mailing Address 2403 Sanders Place

City

Bloomfield Hills

State

MI

Zip Code

48302-0460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Sr. Director Bus Config

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A162C9441E91F40888F2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Piyush Desai

Mailing Address 3620 Beechtree Ln

City

Okemos

State

MI

Zip Code

48864-3864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABC73F14710994E719A0

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Duane DiFranco

Mailing Address 11817 Hunters Creek Ct

City

Plymouth

State

MI

Zip Code

48170-2822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Regional Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2C329275EDD14653BF7

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Peter Dilella

Mailing Address 21660 Summerfield Drive

City

Macomb

State

MI

Zip Code

48044-2287

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Strategy Perf Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A029D565AE4224FF08D7

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Cynthia Dion

Mailing Address 41584 Stonehenge Manor

City

Clinton Township

State

MI

Zip Code

48038-4642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Bus Effic & Continu Imprv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC450E1A5E3F94852B17

Amount of Each Receipt this Period

450.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Sean Drate

Mailing Address 722 Albany

City

Ferndale

State

MI

Zip Code

48220-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

FBD Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8D4E0F681E394AEC8E6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Lisa Drayton

Mailing Address 9335 Sanilac

City

Detroit

State

MI

Zip Code

48224-1245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0EFB29E5DCDC49A583B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

918.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mary Driessche

Mailing Address 6026 Meadowlark

City

Rockford

State

MI

Zip Code

49341-9221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Mgr- Employee & Labor Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5F9A207732AF4CB3864

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Calmeze Dudley

Mailing Address 4232 Wabeek Lk Dr

City

Bloomfield Hills

State

MI

Zip Code

48302-1663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD664CA4ECFCC4245B62

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

John Dunn

Mailing Address 3153 Davenport

City

Rochester Hills

State

MI

Zip Code

48309-4283

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Middle & Small Grp Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A32A2E6F460844D7AB27

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gregory Durkee

Mailing Address 46304 Green Valley Ct

City

Plymouth

State

MI

Zip Code

48170-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Mgr Ind Insid Sales Telmktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2C755321B63043BDBCD

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Gary Dusute

Mailing Address 29762 Bayview

City

Grosse Ile

State

MI

Zip Code

48138-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE1BF5FBC198B4CCA9B5

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Marissa Ebersole

Mailing Address 6218 Valleyfield Dr

City

Plymouth

State

MI

Zip Code

48170-7620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A271B9E60A9D54002BF0

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Scott Eicher

Mailing Address 3355 Essex Ct

City

Troy

State

MI

Zip Code

48084-2722

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ADF84FE8387834B9E98C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Marsha Ennis

Mailing Address 1161 Balfour St

City

Grosse Pointe Park

State

MI

Zip Code

48230-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director - Business Developmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC37F9A561620476C867

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Rebecca Erfurt

Mailing Address 42868 Clay Ct

City

Novi

State

MI

Zip Code

48377-2711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A574D79D2E2104E598BF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jerome Espy

Mailing Address 23140 Eastwood St

City

Oak Park

State

MI

Zip Code

48237-2038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF8788B51F71540A5B05

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Janet Fava

Mailing Address 1094 Whisper Way Ct

City

Troy

State

MI

Zip Code

48098-4419

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4CC2DCB1FD03452B8C6

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Bart Feinbaum

Mailing Address 30351 Southampton Ln

City

Farmington Hills

State

MI

Zip Code

48331-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1054871649C24401BF2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sandra Fester

Mailing Address 11486 Lynhurst Dr

City

Washington

State

MI

Zip Code

48094-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A699F135EACD145F2A64

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Diane Flint

Mailing Address 14240 Talbot

City

Oak Park

State

MI

Zip Code

48237-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5C6AA99FC62B4C009BB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Bert Foote

Mailing Address 4335 West Pointe Drive

City

Waterford

State

MI

Zip Code

48329-4650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Regional Mgr, Bus Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A938E1B2850844895A8A

Amount of Each Receipt this Period

220.00

Payroll Deduction: \$20.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

831.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Camille Forster

Mailing Address 9035 Woodlore South Dr.

City

Plymouth

State

MI

Zip Code

48170-3499

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACAFAD777537E4FEAACB

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Amienne Frenzel

Mailing Address 4591 Covered Bridge

City

Bloomfield Hills

State

MI

Zip Code

48302-1831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7C084D6BD4854D50AD6

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Patricia Fritsch

Mailing Address 37149 Weymouth

City

Livonia

State

MI

Zip Code

48152-4095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A72349294DF454244816

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael Fulkerson Jr

Mailing Address 300 Hamilton
#105

City State Zip Code
Plymouth MI 48170-5043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7AA3EA24FFE04D688E6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Michelle Gaggini

Mailing Address 18515 Country Club Ct

City State Zip Code
Riverview MI 48193-8161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Federal Business Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB4735826A43E43C1BC6

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Robert Galac

Mailing Address 693 Bolinger

City State Zip Code
Rochester Hills MI 48307-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3F5D9CE4E6454439B85

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John Ganos

Mailing Address 316 Abbey Wood Drive

City

Rochester

State

MI

Zip Code

48306-2602

FEC ID number of contributing
federal political committee.**C**Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Assistant General Counsel li

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A585B40BF2D4D4F6BA5B

Amount of Each Receipt this Period

242.00

Payroll Deduction: \$22.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Linda Garrison

Mailing Address 5536 Victory Circle

City

Sterling Heights

State

MI

Zip Code

48310-7700

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP UAW Rtr Med Ben Trs & Lab

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	1

Transaction ID: AF1820ADBD9D049C3AAD

Amount of Each Receipt this Period

225.00

Payroll Deduction: \$45.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Gary Gavin

Mailing Address 23784 Wintergreen

City

Novi

State

MI

Zip Code

48374-3680

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP Key & Large Group Sales

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AF73D8BB56E80417098B

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1052.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Carol Gawronski

Mailing Address 12240 Rohn Road

City

Fenton

State

MI

Zip Code

48430-9519

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD92AD196BC5E48AEAF5

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Elizabeth Geis

Mailing Address 1392 Ludean

City

Highland

State

MI

Zip Code

48356-1168

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir Medicare & Exec Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4F0C14D527C34D209EC

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Dawn Geisert

Mailing Address 55907 Nicholas Dr

City

Shelby Township

State

MI

Zip Code

48316-5817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A640B8A1FB02F4E97A78

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Derek Gemmel

Mailing Address 31460 Adora Ln

City

Flat Rock

State

MI

Zip Code

48134-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A20F6AE68AD4A45169AC

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Renji George

Mailing Address 42123 Cherry Hill Rd

City

Novi

State

MI

Zip Code

48375-2519

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Strategy Perf Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A90BA56C9BB794933884

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Alan Gileczek

Mailing Address 7053 N Lake Orchard Drive

City

Gregory

State

MI

Zip Code

48137-9694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

VP, Bd Regional Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9BE2717CCAB24ACFA29

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

963.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Phillip Gillespie

Mailing Address 1731 Cranston Ct

City

East Lansing

State

MI

Zip Code

48823-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Bus & Program Dev & Reg Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9965DBAAEB834B6B9FE

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Susan Gillette

Mailing Address 460 Orange

City

Wyandotte

State

MI

Zip Code

48192-6226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A330BB7AAB01B4B8CAC1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Sharon Gipson

Mailing Address 33983 Brittany Dr

City

Farmington Hills

State

MI

Zip Code

48335-1427

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB27BB9CF14774DBEBD4

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1599.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mark Giroux

Mailing Address 2127 Woodland Ave

City

Royal Oak

State

MI

Zip Code

48073-3876

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A1C0848B1A5264EEABBB

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Diana Glaab

Mailing Address 24805 Belton Ln

City

Dearborn Heights

State

MI

Zip Code

48127-1377

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Auto National Fin Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A492D0E37094E4B0DB01

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Michele Gladany

Mailing Address 1023 Chestnut Ln

City

South Lyon

State

MI

Zip Code

48178-1896

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Sales Force Training Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AEC1A2DEB217B47B7A6B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Shirley Glazier

Mailing Address 16384 Brookwood Ct

City

Northville

State

MI

Zip Code

48168-3492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABDDF784E320E4DC3A34

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Adam Gnesin

Mailing Address 5669 Walnut Ridge Court

City

West Bloomfield

State

MI

Zip Code

48322-2089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5556EAF9956D40A992F

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Mary Goheen

Mailing Address 46655 Pinehurst Cir

City

Northville

State

MI

Zip Code

48168-8488

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A826C3B5D2B604A38A1F

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John Golding

Mailing Address 41929 Brookview Ln

City

Clinton Township

State

MI

Zip Code

48038-5227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Sr Dir It Systems Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6154B587A8334E25BE8

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Bryant Greene

Mailing Address 4842 Yorkshire Rd

City

Detroit

State

MI

Zip Code

48224-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3C9B589B49FD469DAFF

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Benjamin Grier

Mailing Address 19841 Northbrook Dr

City

Southfield

State

MI

Zip Code

48076-5053

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director Treasury Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2E94CC20FC134A9BBD8

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Grzegorzczuk

Mailing Address 4400 James Dr

City

Midland

State

MI

Zip Code

48642-3781

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director Pharmacy Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A237E9C1613AA4A029C9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Rosemary Gundel

Mailing Address 52105 Loon Ct

City

Shelby Township

State

MI

Zip Code

48315-6946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AB007CB30661C403CA9B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Peggy Gunns

Mailing Address 722 E Columbia St

City

Mason

State

MI

Zip Code

48854-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A6BD504EC8AF74F26AB1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael Gurney

Mailing Address 36648 Almond Circle

City

Farmington Hills

State

MI

Zip Code

48335-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AB938634525CC4C3A85E

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Haar

Mailing Address 3607 Kipling Cir

City

Howell

State

MI

Zip Code

48843-7444

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Svp Subsidiary Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A955A657BEE6A4A4D841

Amount of Each Receipt this Period

975.00

Payroll Deduction: \$75.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Douglas Hamm

Mailing Address 1157 Eagle Nest Dr

City

Milford

State

MI

Zip Code

48381-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecureOccupation
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A8EEF5492A0164AC78EB

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1937.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Matthew Haran

Mailing Address 1771 Glengarry Blvd

City

Canton

State

MI

Zip Code

48188-3240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, Corp Communications

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A07039BBC18AF4FF29F7

Amount of Each Receipt this Period

330.00

Payroll Deduction: \$30.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Vickianne Harbowy

Mailing Address 16092 Swathmore Ct North

City

Livonia

State

MI

Zip Code

48154-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE8C231B380524BEBB4D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Lisa Hardy

Mailing Address 1705 Brian Ct

City

Ann Arbor

State

MI

Zip Code

48104-4267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Sr Dir BCN Off of the Pres

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB33F42467E2E485A877

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1084.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Bonnie Harrington

Mailing Address 3468 Shaddick

City

Waterford

State

MI

Zip Code

48328-2560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE3D2AC4B8523467DBC2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jessica Harris

Mailing Address 31117 Orangelawn St

City

Livonia

State

MI

Zip Code

48150-2926

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6E393FB39AEC4DF99DA

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Audrey Harvey

Mailing Address 25465 Waycross

City

Southfield

State

MI

Zip Code

48033-2206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A72F305AAA9724A59AD9

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gary Harvey

Mailing Address 1835 Robindale

City

Dearborn

State

MI

Zip Code

48128-1047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6301CD8917A44F44862

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

James Haskins IV

Mailing Address 823 E 3rd St

City

Royal Oak

State

MI

Zip Code

48067-2844

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEAD84E0BABDA42E685A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Sharon Heath

Mailing Address 28345 Carlton Way Dr

City

Novi

State

MI

Zip Code

48377-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Devel & Svc Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9F8261FFEEB348B8834

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Steven Hess

Mailing Address 5290 Park Lake Road

City

East Lansing

State

MI

Zip Code

48823-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

EVP, General Counsel

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEA0641EBDA7047D3B23

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Richard Hetzel

Mailing Address 635 McKinley St

City

Plymouth

State

MI

Zip Code

48170-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP Corporate Communications

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB488069F9FD44CF2B9D

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Vanette Hill

Mailing Address 5708 W Hickory Hollow

City

Wayne

State

MI

Zip Code

48184-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5338D82313DA4DE7B61

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1599.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lawrence Hoffman

Mailing Address 6872 Cedarbrook Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7EA73A8E9191470C8A2

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Sarilyn Hogan

Mailing Address 4180 Cross Road

City

White Lake

State

MI

Zip Code

48386-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A81C503FCEE7E49849A2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Joseph Hohner

Mailing Address 2106 Stonebridge Way

City

Canton

State

MI

Zip Code

48188-6227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

EVP Health Care Value & IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3E0D2DF3320646BDBA1

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1391.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kevin Holloway

Mailing Address 5915 Cartago Dr

City
LansingState
MIZip Code
48911-6480FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager Pharmacy Administratio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A6212AF00ABEC45109F4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Rebecca Holnagel

Mailing Address 5117 Giesboro Lane

City
OkemosState
MIZip Code
48864-1269FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of AmeOccupation
Director, Actuary (Fellow)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A9DE60B27E9C143F2872

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Holzhausen

Mailing Address 2523 Wheeler Dr

City
ChelseaState
MIZip Code
48118-9224FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AD5DA61E7C13245CDA4A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

787.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Robert Hopper

Mailing Address 40671 La Grange Dr

City

Sterling Heights

State

MI

Zip Code

48313-4340

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A2CB3AB085C98486ABE2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Jason Hover

Mailing Address 2520 Meadowview Court

City

Rochester Hills

State

MI

Zip Code

48306-3822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A5D2A9604A3AE473BB65

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Gregory Howard

Mailing Address 2102 Winners Circle

City

Saint Johns

State

MI

Zip Code

48879-8167

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of AmeOccupation
Regional Mgr, Bus Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A87F1223BD59F47AABD3

Amount of Each Receipt this Period

220.00

Payroll Deduction: \$20.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

974.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Alan Huddy

Mailing Address 40836 Knightsford Rd

City

Northville

State

MI

Zip Code

48168-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Grp & Ind Pricing Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE24C16EFA784415BBDE

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

James Huetteman

Mailing Address 22901 Wilson

City

Dearborn

State

MI

Zip Code

48128-2808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0FCFB3DEAB124534877

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Amy Hunter

Mailing Address 22 Kenberton Dr

City

Pleasant Ridge

State

MI

Zip Code

48069-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A55FCE1859041448CA18

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$20.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1079.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Bridget Hurd

Mailing Address 25306 St. James

City

Southfield

State

MI

Zip Code

48075-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A378BC6BAE87747DAB07

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Elizabeth Irick

Mailing Address 703 N Highland St

City

Dearborn

State

MI

Zip Code

48128-1654

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A22237D1006B74FAF8D4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Regina Jamerson

Mailing Address 6875 Chase Court

City

West Bloomfield

State

MI

Zip Code

48322-3292

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0D427C7BFEF645779CC

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Leslie James

Mailing Address 528 Woodhaven Dr

City

Commerce Township

State

MI

Zip Code

48390-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF967EF5C45D54D81952

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Harvie Jarrell

Mailing Address 1219 Berkshire Dr

City

Williamston

State

MI

Zip Code

48895-9211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A02E8E5C45C45493CB38

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Sue Jenkins

Mailing Address 2391 Forest Oak Trl

City

Williamston

State

MI

Zip Code

48895-9032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACC011ADD04C64DEA953

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael Jennings II

Mailing Address 24637 Millcreek Dr

City

Farmington Hills

State

MI

Zip Code

48336-2809

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A66236C91470F4414ABE

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Janet Jennings

Mailing Address 8120 E. Jefferson
#7d

City

Detroit

State

MI

Zip Code

48214-2665

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Dir Medical Informatics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A67C0905BE5AD4014B19

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Jerry Johnson

Mailing Address 22076 Chatsford Circuit

City

Southfield

State

MI

Zip Code

48034-2119

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A0FCDA3B0B70C4A7FA99

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mark Johnson

Mailing Address 1251 Bembridge Dr

City

Rochester Hills

State

MI

Zip Code

48307-5718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Provider Perf Inv & Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD703189930B74B54B8F

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kimberly Jones-Schneider

Mailing Address 1219 Chelsea Blvd

City

Oxford

State

MI

Zip Code

48371-6729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE120CA13DDF34237B70

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kristen Kangas-Kraft

Mailing Address 1219 S Swegles St

City

Saint Johns

State

MI

Zip Code

48879-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A120B32F591EC4DA19FC

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Robert Kasperek

Mailing Address 34796 Bretton

City

Livonia

State

MI

Zip Code

48152-4047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Deputy Gen Cnsl Reg Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A73DA4DA95BFE4542846

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Paul Kauffman

Mailing Address 6091 Balmoral Way

City

Commerce Township

State

MI

Zip Code

48382-4892

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Director, Medical Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A42C88958EBA44DDAB83

Amount of Each Receipt this Period

220.00

Payroll Deduction: \$20.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

David Keener

Mailing Address 823 W Oakridge

City

Ferndale

State

MI

Zip Code

48220-2753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACF7F5921170C4194869

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1039.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Valerie Keesee

Mailing Address 3400 E Coon Lake Rd

City

Howell

State

MI

Zip Code

48843-9420

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir - Human Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A32CDAE57D54443BAAFA

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Lorrie Keilman

Mailing Address 22044 Olmstead

City

Dearborn

State

MI

Zip Code

48124-2754

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9A13DD8F075F496E819

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Tricia Keith

Mailing Address 1918 Lloyd Ave

City

Royal Oak

State

MI

Zip Code

48073-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Corporate Secy & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0D92021ABBC44CD28A9

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Stephen Kellar

Mailing Address 23268 Mystic Frst

City

Novi

State

MI

Zip Code

48375-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation

VP & CFO Lifesecure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A89D7FBB133D64243A86

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Victoria Kell

Mailing Address 8175 Hunter Road

City

Bath

State

MI

Zip Code

48808-9459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Director, Comp & Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1724A0F4A09F48E7829

Amount of Each Receipt this Period

330.00

Payroll Deduction: \$30.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Laurie Kelly

Mailing Address 498 N Evergreen St

City

Plymouth

State

MI

Zip Code

48170-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4C763DF7FE97441CBD1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1149.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Korin Kendra

Mailing Address 815 S Lafayette

City

Dearborn

State

MI

Zip Code

48124-1547

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A655D69982CBF4E82805

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Marc Keshishian

Mailing Address 30498 Fox Club Dr

City

Farmington Hills

State

MI

Zip Code

48331-1956

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Svp & Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A80EEF3BFAC69438F94C

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Kevin Keyser

Mailing Address 32567 Haverford Rd

City

Franklin

State

MI

Zip Code

48025-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Medicare Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: ABE679B35289D499C9BF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1391.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

S Kipa

Mailing Address 4774 Avondale Terrace

City

Bloomfield Hills

State

MI

Zip Code

48304-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9A811D54FC514D809D9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kerilyn Kittmann

Mailing Address 4325 Chancellor Drive

City

Dewitt

State

MI

Zip Code

48820-7878

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1D964EEDC97A4CAD8D1

Amount of Each Receipt this Period

330.00

Payroll Deduction: \$30.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kevin Klobucar

Mailing Address 2766 Addison Cir N

City

Rochester

State

MI

Zip Code

48306-4912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Bcbm & President Bcn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2167568C4D5145AB9C6

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1292.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan Kluge

Mailing Address 10795 Stoney Point Dr

City

South Lyon

State

MI

Zip Code

48178-9820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Svp & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AFF95E047F65244EF9F9

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Joann Kochis

Mailing Address 8347 Thorntree Dr.

City

Grosse Ile

State

MI

Zip Code

48138-1515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A3736E6AEB0AD410A905

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Lorna Koscielny

Mailing Address 35560 Ann Arbor Trail

City

Livonia

State

MI

Zip Code

48150-3596

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Program Manager Contract Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: ADF821AB71B7A4FC291A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Eileen Kostanecki

Mailing Address 6012 27th Rd N

City

Arlington

State

VA

Zip Code

22207-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Health Policy Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6E06EE4BE01F476E980

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Elana Kozik

Mailing Address 13109 Vernon

City

Huntington Woods

State

MI

Zip Code

48070-1451

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Prod/proc Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE0427847DA6C40D1BE9

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kenneth Krisan

Mailing Address 1921 Dogwood Trail

City

Commerce Township

State

MI

Zip Code

48390-3914

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9A200081940C485DB38

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Julia Kuks

Mailing Address 1073 Magnolia

City

Inkster

State

MI

Zip Code

48141-1731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACDA028EAAA754DB2801

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Susan Kuypers

Mailing Address 21524 Boyd Court

City

Macomb

State

MI

Zip Code

48044-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2D92C41DAD704A4C81B

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$20.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Katherine Labadie

Mailing Address 40269 Sandy Dr

City

Clinton Township

State

MI

Zip Code

48038-4718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A767177068C1A428E989

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

871.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Darcy Lake Kerr

Mailing Address 10700 Sunfield Road

City

Sunfield

State

MI

Zip Code

48890-9746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP, Human Resources

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A08140FFC896F408BAF2

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Beverly Lamb-Stovall

Mailing Address 5711 Branford Dr

City

West Bloomfield

State

MI

Zip Code

48322-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1CDAEDD6D29F48818CF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Anthony Lancione

Mailing Address 2463 Lost Creek Drive

City

Flushing

State

MI

Zip Code

48433-9437

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, Premium Audit

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8C484FCB95D4435EBCD

Amount of Each Receipt this Period

275.00

Payroll Deduction: \$25.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1147.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Lang

Mailing Address 9050 Carter Dr

City

Saline

State

MI

Zip Code

48176-8006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Pharmacy Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEF947CC5CD9A498EB5B

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kerri Larkin

Mailing Address 21882 Chase Dr

City

Novi

State

MI

Zip Code

48375-4766

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A426CCC808C38454AB87

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Marla Larkin

Mailing Address 19182 Blackstone

City

Detroit

State

MI

Zip Code

48219-1957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF0C5033CDECF40E7853

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kevin Law

Mailing Address 1321 Mill Creek Dr

City

Waterford

State

MI

Zip Code

48327-3090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager - Talent Acq

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9463B46CEB364F7B9BC

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Elaina Lee

Mailing Address 27861 Weymouth Dr

City

Farmington Hills

State

MI

Zip Code

48334-3247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Analyst - Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC8F8BCA62CC94841980

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Cheri Lehto

Mailing Address 4051 Wakefield Rd

City

Berkley

State

MI

Zip Code

48072-1409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5434AC5A2EBC46A4931

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Beverly Lentz

Mailing Address 1921 Vineway
Unit 35

City State Zip Code
Canton MI 48188-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A54FD47C12DAB4C5C946

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)
Elizabeth Lepouttre

Mailing Address 36552 Catalpa Ln

City State Zip Code
New Baltimore MI 48047-5575

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF7C037F48FC04C99883

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)
Kathryn Levine

Mailing Address 1788 Pierce

City State Zip Code
Birmingham MI 48009-2056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Corp Mkting & Cust Experien

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A051D59F389424983AD0

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Orin Lewis

Mailing Address 5827 Applewood
Apt 802

City State Zip Code
West Bloomfield MI 48322-3479

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir Customer Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1861F72CD11C44C9828

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Crystal Lewis

Mailing Address 22280 Ivanhoe Lane

City State Zip Code
Southfield MI 48034-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8C780A69EEDD450E959

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Thomas Leyden

Mailing Address 48808 Meadow Dr

City State Zip Code
Plymouth MI 48170-3260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A68FDF6552F174569B61

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Lieblang

Mailing Address 22337 Tenny

City

Dearborn

State

MI

Zip Code

48124-2744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC7BDE5EF3075401F9F2

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

James Line

Mailing Address 117 Wenonah Drive

City

Pontiac

State

MI

Zip Code

48341-1957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AAD7BE785FBF7471CAE9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

David Linehan

Mailing Address 31206 Bobrich

City

Livonia

State

MI

Zip Code

48152-4503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACB88C78E658541588A6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

DeAndre Lipscomb

Mailing Address 29064 Raleigh Rd

City

Farmington Hills

State

MI

Zip Code

48336-1453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 1 1

Transaction ID: AE29CC0D5FEE04AA9A96

Amount of Each Receipt this Period

261.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Rollyn Llewellyn II

Mailing Address 5897 Donaldson Dr

City

Troy

State

MI

Zip Code

48085-3109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD8DFA3BE74464B7589A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Daniel Loepf

Mailing Address 1720 Washington Blvd

City

Birmingham

State

MI

Zip Code

48009-1918

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA5BB719AAB724F1F872

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Cathy Longo

Mailing Address 30790 Plum Lane

City

Madison Heights

State

MI

Zip Code

48071-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A905D496FFA1D4AB7B62

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Gina Lynem-Hayden

Mailing Address 7368 Heather Heath

City

West Bloomfield

State

MI

Zip Code

48322-3645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Physician Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC301DDB449DE4B0AAFF

Amount of Each Receipt this Period

240.00

Payroll Deduction: \$20.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Brian Mabie

Mailing Address 42309 Oakland Drive

City

Canton

State

MI

Zip Code

48188-5218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Clinical Pharmacist- Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2A28BF14F2A74993870

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

851.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Paul MacLellan

Mailing Address 13284 Karl Dr

City

Plymouth

State

MI

Zip Code

48170-1093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5646248A60FE4F6C958

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Janet Macqueen

Mailing Address 3214 Chesapeake Dr

City

Sterling Heights

State

MI

Zip Code

48314-1869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Chief Info Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFA458C39A6E6452F8EF

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Chris Maier

Mailing Address 6061 Middle Lake Rd

City

Clarkston

State

MI

Zip Code

48346-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Claims & Enrollment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1657ABF307204905B3F

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1742.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Julie Maier

Mailing Address 6061 Middle Lake Rd

City

Clarkston

State

MI

Zip Code

48346-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5B46E664030F43C8AF3

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Patricia Mallett

Mailing Address 10442 Hart Ave.

City

Huntington Woods

State

MI

Zip Code

48070-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Consultant Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A22A48EF6B0AB4B82870

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Laura Marble

Mailing Address 1880 Golf Ridge Dr S

City

Bloomfield Hills

State

MI

Zip Code

48302-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Mi Delivery System&support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A012E9946C4C2435DA15

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Daniel Martin

Mailing Address 1447 W Hazelhurst St

City

Ferndale

State

MI

Zip Code

48220-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Provider Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A259C46163D1841F7A10

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Trine Martinez

Mailing Address 43585 Serenity Dr.

City

Northville

State

MI

Zip Code

48167-8932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF7BA077889B24F3E8C4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Frank Maslowski

Mailing Address 5160 Mead

City

Dearborn

State

MI

Zip Code

48126-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3A9DD121220E4A159C8

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Patrice Matejka

Mailing Address 19520 Hillcrest

City

Livonia

State

MI

Zip Code

48152-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director Hr Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A523A11FD675C4FD5A26

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Sibi Mathew

Mailing Address 12653 Wendover Ct

City

Plymouth

State

MI

Zip Code

48170-8218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC3E1160803B44734983

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Michael Mattei

Mailing Address 6088 Glen Eagles

City

West Bloomfield

State

MI

Zip Code

48323-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFC5D5A9254914E0FBF0

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gregory Mays

Mailing Address 33865 Trillium Court

City

Livonia

State

MI

Zip Code

48150-3685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A48E08E087BA8493EBDF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Andrew McCallum

Mailing Address 25823 Groveland Ln

City

Novi

State

MI

Zip Code

48374-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A43EC2D4E9D2D4894858

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Judy-Ann McChester

Mailing Address 17120 Coral Gables

City

Southfield

State

MI

Zip Code

48076-4701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC4AA6294F2C64CA6A6D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Pierre McDougall

Mailing Address 19473 Tanglewood Circle

City

Clinton Township

State

MI

Zip Code

48038-4961

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A68ABF45C0C874AA7855

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Adonna Mcfall

Mailing Address PO Box 3895

City

Southfield

State

MI

Zip Code

48037-3895

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7962512DBE8049EFA3A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Monica McKinney

Mailing Address 36350 Fredericksburg Rd

City

Farmington Hills

State

MI

Zip Code

48331-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEB7FF386F19D47DFB36

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dan Mekled

Mailing Address 1750 N Rosevere

City

Dearborn

State

MI

Zip Code

48128-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Consultant - Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7319D4FC720F42B7A22

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Darrell Middleton

Mailing Address 5669 Shore Dr

City

Orchard Lake

State

MI

Zip Code

48324-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

EVP Ops & Business Perform

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9396E2BCB8344F7F9CC

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Robert Milewski

Mailing Address 59769 Glacier Club Dr

City

Washington

State

MI

Zip Code

48094-2287

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

SPC Ast To Prs Hosp Rltn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2704ADD40AC6402491A

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1794.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Craig Millard

Mailing Address 1072 Blue Ridge Drive

City

Clarkston

State

MI

Zip Code

48348-4091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD7A2E75B21154964B74

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Adam Miller

Mailing Address 711 Barrington Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1724

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A389756B36C414F95915

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

James Mills

Mailing Address 37753 Chase Ct

City

Livonia

State

MI

Zip Code

48150-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A2F9A2CF99CCE4CA7A9F

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dominick Mitchell III

Mailing Address 41500 Ladywood Ct

City

Northville

State

MI

Zip Code

48168-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AECBD83AE4AB24C54853

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Amy Modlin

Mailing Address 2312 Fort William Dr

City

Olney

State

MD

Zip Code

20832-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8EDDD317ABA346FF813

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Michael Momrik

Mailing Address 15504 Oak Hollow Drive

City

Holly

State

MI

Zip Code

48442-9524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABCB2457DA2E841A7910

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kevin Monaghan

Mailing Address 130 S. Connecticut Ave.

City

Royal Oak

State

MI

Zip Code

48067-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Tech Solutions Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1E70001857BA4E2981B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Cindy Monroe

Mailing Address 320 Hamilton Rd

City

Bloomfield Hills

State

MI

Zip Code

48301-2544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC8048F90CF704DFCA73

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Erika Monroe

Mailing Address 15531 Brookstone Dr

City

Clinton Township

State

MI

Zip Code

48035-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Actuarial Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA5C9D2AF2BE04AC7BA0

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Barbara Mooradian

Mailing Address 2621 Somerset
Apt 201

City State Zip Code
Troy MI 48084-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE8E1DB0547434BAA6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Mary Moore

Mailing Address 7732 Hipp

City State Zip Code
Taylor MI 48180-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A634C9832786F42AC8AD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Rick Morrone

Mailing Address 3751 Parker

City State Zip Code
Dearborn MI 48124-3557

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP URBMT & Auto Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3C3831C82795446FA3D

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Paul Mozak

Mailing Address 22552 Havergale St

City

Novi

State

MI

Zip Code

48374-3792

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A35521CDA2C614AEEAC7

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Catherine Murphy

Mailing Address 31700 W Bell Vine Trl

City

Beverly Hills

State

MI

Zip Code

48025-3715

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir Memb & Prov Acctg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0F965655F1094E32AD2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Joseph Murray

Mailing Address 22325 Yale St

City

Saint Clair Shores

State

MI

Zip Code

48081-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA8A816B40B374663851

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Paula Mutch

Mailing Address 46344 Turnbuckle Ln

City

Macomb

State

MI

Zip Code

48044-6204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA885E91940F14246BA7

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Geoffrey Mwaungulu

Mailing Address 29816 Deer Run

City

Farmington Hills

State

MI

Zip Code

48331-1980

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A305F123EED38419DB0E

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Robin Mynhier

Mailing Address 10012 Scots Pine Dr

City

Brighton

State

MI

Zip Code

48116-8425

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC4629EC4A00844CDBA1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Reina Navarra

Mailing Address 43529 Bayfield

City

Clinton Township

State

MI

Zip Code

48038-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A544C15E4719340C9BA9

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

James Negro

Mailing Address 5270 Inverrary Ln

City

Commerce Township

State

MI

Zip Code

48382-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC38437BFC5B34801B1E

Amount of Each Receipt this Period

468.00

Payroll Deduction: \$36.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

David Nelson

Mailing Address 23928 Devonshire Dr

City

Novi

State

MI

Zip Code

48374-3758

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP and Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A050A35E2710042F0B5F

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1287.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Roy Nesler

Mailing Address PO Box 871159

City

Canton

State

MI

Zip Code

48187-6159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir - Payroll Srvc & HRIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0A104DDF32C84B18AE2

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Dana Newton

Mailing Address The Franklin 28675 Franklin Rd
Apt 424

City

Southfield

State

MI

Zip Code

48034-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEC12C5F0BD7A49AB910

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Marla Nicholas

Mailing Address 144 Mohawk

City

Dearborn

State

MI

Zip Code

48124-1322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4008CAF62F3F440DA8A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey Nielson

Mailing Address 22875 Cranbrooke Dr

City

Novi

State

MI

Zip Code

48375-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA105E87665EB4AF7ACD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jennifer Nosakowski

Mailing Address 1377 Morning Mist Dr

City

Howell

State

MI

Zip Code

48843-7012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A52ACE482D6C743149E5

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Leo Nouhan

Mailing Address 1326 Yorkshire

City

Grosse Pointe Park

State

MI

Zip Code

48230-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC3D5D579EA274AB18A6

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Harry Nowell III

Mailing Address 598 Longfellow Dr

City

Troy

State

MI

Zip Code

48085-4815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0CAE5EE272AF459B9F1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Gerald Noxon

Mailing Address 22745 Huron River Dr

City

New Boston

State

MI

Zip Code

48164-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFEF84105DE3744EEA10

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Laura OConnor

Mailing Address 38966 Mt Kisco

City

Sterling Heights

State

MI

Zip Code

48310-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AAD9A774995964B23B59

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Oehlberg

Mailing Address 479 Clair Hill Dr

City

Rochester Hills

State

MI

Zip Code

48309-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB52CF410603741CEB75

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Michelle Oginsky

Mailing Address 5522 Hertford Dr

City

Troy

State

MI

Zip Code

48085-3235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Strategy Perf Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA6692DCA9816401BB75

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Lisa O'Higgins

Mailing Address 8062 Racine Rd

City

Warren

State

MI

Zip Code

48093-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Analyst - Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A957E75B302784B0BB4A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Linda Oliver

Mailing Address 28067 New Bedford Dr

City

Farmington Hills

State

MI

Zip Code

48334-3220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A1DE0BBAF01F54591ACD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Randy Oliver

Mailing Address 17572 Goldeneye Drive

City

Clinton Township

State

MI

Zip Code

48038-1191

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Mgr IT Audit PRJ Advisory

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	1

Transaction ID: A69121959BB004777852

Amount of Each Receipt this Period

216.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Sharon Oneill

Mailing Address 7228 Gully

City

Dearborn Heights

State

MI

Zip Code

48127-3807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A5EDE908307564257AE8

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

827.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Tiffany Otis-Albert

Mailing Address 18920 Stonewater Blvd

City

Northville

State

MI

Zip Code

48168-8560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4C674E4839FD4F8CA21

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Arva Overton

Mailing Address 37404 Legends Trail Dr

City

Farmington Hills

State

MI

Zip Code

48331-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEF565254C89645C6A28

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Mark Owen

Mailing Address 188 N Glenhurst Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-2631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Federal & Individual Bus

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A013877422DF74EE4A44

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michelle Pace

Mailing Address 9608 Hubert

City

Allen Park

State

MI

Zip Code

48101-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Rating/underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1EE980E49E934C53AFF

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Carl Pate Jr

Mailing Address 2036 Church Place

City

Trenton

State

MI

Zip Code

48183-2192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A752D411A59A642A6A9C

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Concettina Patsalis

Mailing Address 15974 Jupiter Hills Dr

City

Northville

State

MI

Zip Code

48168-8628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AAD183F73271846ADAF

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Glen Perry

Mailing Address 2148 Michele Dr

City

Troy

State

MI

Zip Code

48085-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A25BAC01413714AFEB9A

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Marcia Persin

Mailing Address 5274 Pond Bluff Drive

City

West Bloomfield

State

MI

Zip Code

48323-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFCE24AA5FC3245D597C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Richard Phillips

Mailing Address 40101 W Huron River

City

Romulus

State

MI

Zip Code

48174-4811

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5220C08CB63C4E299FF

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Robert Phillips

Mailing Address 21985 Ember Ct

City

Grosse Ile

State

MI

Zip Code

48138-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0C58AF2E886A4B1381C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Anthony Phillips

Mailing Address 8697 North Hills Court

City

Howell

State

MI

Zip Code

48843-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

VP, Chief RO & Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABDC59EB2E128478CBA9

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

William Plies

Mailing Address 1334 Cole St

City

Birmingham

State

MI

Zip Code

48009-7033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0D34AFAFB9D64207B12

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1249.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gino Polidori Jr

Mailing Address 2170 Antique Ct

City

Canton

State

MI

Zip Code

48187-5826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A87A9D4FBA04B459293C

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Alison Pollard

Mailing Address 170 Orchard St

City

Chelsea

State

MI

Zip Code

48118-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Provider Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1AFD471A1F2D4AE6A44

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Tonja Poole

Mailing Address 636 Watersedge Dr.

City

Ann Arbor

State

MI

Zip Code

48105-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Compensation Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACD0F8A03E64E456F85A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kathleen Popiela

Mailing Address 36365 Parklane Circle

City

Farmington Hills

State

MI

Zip Code

48335-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A84C61470C83A4B5C826

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Erik Poppe

Mailing Address 1002 Whitegate Dr

City

Northville

State

MI

Zip Code

48167-1078

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation
Tbd-manager & Above

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AAC272C34328B47B3849

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Catherine Porter

Mailing Address 14226 Deering

City

Livonia

State

MI

Zip Code

48154-4618

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director - Talent Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA4AB0A42ABAD4CF7892

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Pranschke

Mailing Address 36025 Grennada

City

Livonia

State

MI

Zip Code

48154-5241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A481A68B5EF4E41A5A5C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Duane Pretzer Jr

Mailing Address 30329 Iroquois

City

Warren

State

MI

Zip Code

48088-5028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Enterprise Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFA7FFBD87A0F4F05918

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Heather Price

Mailing Address 43524 Scenic Ln

City

Northville

State

MI

Zip Code

48167-8927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5984C3CD52164C8BA7C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Patrick Prichard

Mailing Address 4315 Shady Hill Lane

City
Lansing

State
MI

Zip Code
48917-1661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6DD87329FA1F4C618A6

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Carol Purdy

Mailing Address 36989 Fox Glen

City

Farmington Hills

State

MI

Zip Code
48331-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Mgr Diversity & Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0BCE6974636F4DDA95A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Adam Quesnel

Mailing Address PO Box 293

City

Shepherd

State

MI

Zip Code
48883-0293

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Enterprise Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6B6E767C254C4B90BD9

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sophia Quinn

Mailing Address 241 Tuscany Dr

City

State

Zip Code

Portage

MI

49024-9109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3700907B09F54AFAAC3

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Renee Rabideau

Mailing Address 1699 S Shore Dr

City

State

Zip Code

Rochester Hills

MI

48307-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD99EFC6C314F4436BFA

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Ara Rafaelian

Mailing Address 245 Crest

City

State

Zip Code

Ann Arbor

MI

48103-4315

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB9A4A5CD8129477A8DE

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Rafferty

Mailing Address 14128 Thames

City

Shelby Township

State

MI

Zip Code

48315-5437

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A0C107FE3D6F446558FB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Charlene Rayburn

Mailing Address 44739 North Hills Dr
Apt 98

City

Northville

State

MI

Zip Code

48167-6114

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A19FDB5F8C0A54B49A2B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Jacquelyn Redding

Mailing Address 6368 Morland St

City

Erie

State

MI

Zip Code

48133-9624

FEC ID number of contributing
federal political committee.**C**Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AE3CB2A636702407094E

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey Reeve

Mailing Address 567 St Louis St

City

Ferndale

State

MI

Zip Code

48220-2436

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Marketing Research Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A504106DEF9B74D6E893

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Susan Remisiewicz

Mailing Address 18432 Stamford St

City

Livonia

State

MI

Zip Code

48152-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8FC1CF43A35740CEB1A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Robert Reynolds

Mailing Address 314 Hillcrest Ave

City

Grosse Pointe Farm

State

MI

Zip Code

48236-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB23B7DBBDD9742DB9A4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Steven Reynolds

Mailing Address 12416 Golden Oaks Drive

City

Milford

State

MI

Zip Code

48380-1254

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP, Strtg Pln & Corp Secretary

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A53287F6AE2B348A3817

Amount of Each Receipt this Period

550.00

Payroll Deduction: \$50.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Eric Rhind

Mailing Address 684 Puritan Ave

City

Birmingham

State

MI

Zip Code

48009-4634

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director - Pymt Integ & Recov

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AB03E4445E6984393BD1

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Amy Richardson

Mailing Address 20981 Laser Ln

City

South Lyon

State

MI

Zip Code

48178-9222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager Customer Service

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A1048FA11F76F41D292B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1161.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Robb

Mailing Address 3413 Wolverine Dr

City

Troy

State

MI

Zip Code

48083-6803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Special Asst To CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A98C14B057B3D41909BB

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Annette Robertson

Mailing Address 31264 Lund Ave

City

Warren

State

MI

Zip Code

48093-7917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A32616E64C95E44C5B42

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Robyn Rontal

Mailing Address 2397 Rockport Ct

City

Ann Arbor

State

MI

Zip Code

48103-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA883B8C93EDC4DD7B6E

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kelley Root

Mailing Address 11725 Forestwood Drive

City

Cedar Springs

State

MI

Zip Code

49319-8236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AD8B38F442FF54664962

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Gail Ross

Mailing Address 322 E Harrison Ave
Unit 26

City

Royal Oak

State

MI

Zip Code

48067-3284

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AEC2AF21E007445489E2

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Lynda Rossi

Mailing Address 1066 Foxborough Dr

City

Williamston

State

MI

Zip Code

48895-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

SVP Publ Aff & Chf Of Stf

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A5EE338B369FC4085978

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1742.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Rodney Ross

Mailing Address 1345 W Long Lake Rd

City

Bloomfield Hills

State

MI

Zip Code

48302-1336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF73E813EA18F4266948

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Thomas Ruane

Mailing Address 26509 Old Homestead Ct

City

Farmington Hills

State

MI

Zip Code

48331-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABB197B07DB6041D2817

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Susan Rubin

Mailing Address 41460 Belden Circle

City

Novi

State

MI

Zip Code

48377-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7EB0695EB4D54874AD4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey Rubleski

Mailing Address 4045 Forest Point Dr

City

Norton Shores

State

MI

Zip Code

49441-4680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA6DEE4E6845A47F7AF8

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jeffrey Rumley

Mailing Address 951 Hampton Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEAFF130F2B4DE47AE8D5

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Joanne Rusch

Mailing Address 4171 Fallow

City

West Bloomfield

State

MI

Zip Code

48323-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Principal Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A66A8BE3214454239980

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Terrence Rush

Mailing Address 47185 Marisa Ct

City

Plymouth

State

MI

Zip Code

48170-3491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A17CFF0BDE7F442E2949

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Anthony Russo

Mailing Address 23003 Brookdale

City

Saint Clair Shores

State

MI

Zip Code

48082-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD4D1AE5680A74E0C9D1

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Annette Sabatella

Mailing Address 411 Saddle Lane

City

Grosse Pointe Wood

State

MI

Zip Code

48236-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A221E42A023F447CA991

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Julie Sailus

Mailing Address 3155 Lincoln St

City

Dearborn

State

MI

Zip Code

48124-3505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A888E256166C34D75A85

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Constance Samuel

Mailing Address River Oaks 23475 Long Point Way
Apt 303

City

Novi

State

MI

Zip Code

48375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A041F5F6B515643CE847

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Shibu Samuel

Mailing Address 4038 Mayfair St

City

Dearborn Heights

State

MI

Zip Code

48125-3063

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE2C6740B6A3C4FDAA03

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michele Samuels

Mailing Address 29203 Bradmoor Ct

City

Farmington Hills

State

MI

Zip Code

48334-3270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Gnrl Aud & Corp Compli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A75612E13052F4DABBCD

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Seetharaman Santhanam

Mailing Address 801 W Long Lake Rd
Apt G6

City

Bloomfield Hills

State

MI

Zip Code

48302-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A26FD4976B77140B2A81

Amount of Each Receipt this Period

232.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Juanita Savage

Mailing Address 25646 Castlereigh Dr

City

Farmington Hills

State

MI

Zip Code

48336-1523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACE4A2C76D8384590845

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1389.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Frederick Schaal

Mailing Address 2109 Ray Road

City

Fenton

State

MI

Zip Code

48430-9709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A726182C4275245B58A9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Michael Schneider

Mailing Address 27465 Shagbark Dr

City

Southfield

State

MI

Zip Code

48076-7420

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A4845CFD76C4C43428C5

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Curtis Schoenjahr

Mailing Address 3660 Seney Dr

City

Lake Orion

State

MI

Zip Code

48360-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AC4FCCB7A7ABA4066AEE

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ronald Schoen

Mailing Address 121 Swallowtail Lane

City

Okemos

State

MI

Zip Code

48864-3186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Evp, & Chief Financial Officer

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A08B3291AD8204CE4B6B

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kathleen Schummer

Mailing Address 1540 Oxford

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A00C826ADE11644B0816

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kimberley Scicluna

Mailing Address 23124 Liberty

City

Saint Clair Shores

State

MI

Zip Code

48080-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Proj Mgr Ppi

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A822E8B30D7F245C9A45

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1106.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jayne Scott

Mailing Address 2939 Muirwood Ct

City

Waterford

State

MI

Zip Code

48329-2396

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF641139CACAC49BFBCC

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Clyde Scott

Mailing Address 20636 Maple Lane

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Assistant General Counsel li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD4D07D4C36FE46778EA

Amount of Each Receipt this Period

352.00

Payroll Deduction: \$32.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Deanne Seifert

Mailing Address 5517 Kingfield Dr

City

West Bloomfield

State

MI

Zip Code

48322-1459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A59901A5138B440D388E

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

820.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael Sekoni

Mailing Address 16590 Broadview Drive

City

East Lansing

State

MI

Zip Code

48823-9628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP, & General Auditor

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1556EABDDE0349829E0

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Michael Seling

Mailing Address 8610 Carlsbad Lane

City

Lansing

State

MI

Zip Code

48917-5807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Regional Mgr, Bus Development

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9E793F1898D1487F98E

Amount of Each Receipt this Period

220.00

Payroll Deduction: \$20.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Brenda Selle

Mailing Address 11305 Cemetery Rd

City

Erie

State

MI

Zip Code

48133-9734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A37CA96A40CB84CEBA57

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

949.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth Setera

Mailing Address 46273 Glen Pointe Dr

City

Shelby Township

State

MI

Zip Code

48315-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A158CAA6829F241BA87D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Becky Sexton

Mailing Address 29929 Meridian PI
Apt 18202

City

Farmington Hills

State

MI

Zip Code

48331-5873

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9E77DB6CA453490081E

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Karriem Shakoor

Mailing Address 4822 Trailview

City

West Bloomfield

State

MI

Zip Code

48322-4572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Sr Dir It Systems Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0B6E094D7B1143DAA04

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lori Shannon

Mailing Address 2849 Courville Drive

City

Bloomfield Hills

State

MI

Zip Code

48302-1020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A246AE3AD97964ECA8FE

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

David Share

Mailing Address 1225 Fair Oaks Parkway

City

Ann Arbor

State

MI

Zip Code

48104-3628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Asst Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA01FC15BD0C24E9FAF5

Amount of Each Receipt this Period

270.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Carl Siebers

Mailing Address 232 Quail Ridge

City

Ada

State

MI

Zip Code

49301-8778

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Claims Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AF41FA1AADEF04934A63

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1089.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Thomas Simmer

Mailing Address 4975 S Ridgeside Circle

City

Ann Arbor

State

MI

Zip Code

48105-9447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

SVP & CMO Health Care Value

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: ABF09B4CC28CE47F9BF0

Amount of Each Receipt this Period

780.00

Payroll Deduction: \$60.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

James Simmon

Mailing Address 1269 Roslyn Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1385

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A42173E9828E64597878

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Catherine Sinning

Mailing Address 25232 Surrey Lane

City

Farmington Hills

State

MI

Zip Code

48335-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director - Exec Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AF1B72F13017A40F4AAE

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1391.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Frank Slisinger

Mailing Address 34518 Morningdale Dr

City

Sterling Heights

State

MI

Zip Code

48312-5744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8174BAD0F00A43DB9AB

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Patricia Slisinger

Mailing Address 34518 Morningdale Dr

City

Sterling Heights

State

MI

Zip Code

48312-5744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4C91A8D592FF4503B88

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Craig Smith

Mailing Address 7141 Placita Ct.

City

Grand Rapids

State

MI

Zip Code

49546-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE962B073A90D4B22B5B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mary Smith

Mailing Address 10058 King Rd

City State Zip Code
Davisburg MI 48350-1900

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Utilization Mgt & Prog Supt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 3 0 2 0 1 1

Transaction ID: A540AA15E32E546BC82C

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)
Sondra Smith

Mailing Address 2914 Bamlet Rd

City State Zip Code
Royal Oak MI 48073-2979

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 3 0 2 0 1 1

Transaction ID: A189CD92B109744D6960

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)
Marilyn Smith

Mailing Address 2485 Kimberly Fair

City State Zip Code
Rochester Hills MI 48309-2061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 3 0 2 0 1 1

Transaction ID: A3AF870CB7BA54C599F4

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Julie Smith-Spears

Mailing Address 21560 Woodfarm Dr

City

Northville

State

MI

Zip Code

48167-9766

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A902FFFB69A3F4BD985F

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Patricia Snyder

Mailing Address 17175 Tall Pines Ct

City

Northville

State

MI

Zip Code

48168-1883

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA6AA6B1CEC0B46D8BFF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kim Sorget

Mailing Address 620 Hollywood Ave

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP Prov Cont & Fac & Anc Pymt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC42F861A50DD47558E0

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Scott Sowulewski

Mailing Address 11949 Schavey Rd.

City

Dewitt

State

MI

Zip Code

48820-8720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, EE & Labor Relations

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFB9D513087FE48108F5

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

David Spath

Mailing Address 36310 Gregory

City

Sterling Heights

State

MI

Zip Code

48312-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager Admin

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1B50CF95C7114D528D4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Martha Spenny

Mailing Address 23633 Berg Rd

City

Southfield

State

MI

Zip Code

48033-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Actuary-associate

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A995B220C229444599E0

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

930.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Karen Spring

Mailing Address 5267 Kristi Lane

City

Commerce Township

State

MI

Zip Code

48382-3356

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE2EE9BC52D9848ACBE1

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Donna Stache

Mailing Address 3640 Worthington Ct

City

Rochester Hills

State

MI

Zip Code

48309-1180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Mgr Primary & Secondary Res

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC959E3793D424448A93

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kevin Stanko

Mailing Address 2233 Camelot Drive

City

Troy

State

MI

Zip Code

48083-2556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1F20C93305CC4DEAA11

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 131 / 223

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Charmaine Stevens

Mailing Address 47011 Mornington Rd

City

Canton

State

MI

Zip Code

48188-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4E9CA033155D48EFAB0

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Helen Stojic

Mailing Address 28 Elm Park Blvd

City

Pleasant Ridge

State

MI

Zip Code

48069-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A83E637C2B09349829AF

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Patricia Stone

Mailing Address 3377 Dewdrop Lane

City

Howell

State

MI

Zip Code

48843-7380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director Admin Svcs Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ACF0EC050D7414E71B92

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 132 / 223

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Brenda Storie

Mailing Address 30060 Lamplighter

City

New Hudson

State

MI

Zip Code

48165-9679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6A1E1E3CAB93449F8C4

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Michael Strampel

Mailing Address 13140 Addington Dr

City

Dewitt

State

MI

Zip Code

48820-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Clinical Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE035484A7E29450284B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Ira Strumwasser

Mailing Address 5076 Scio Church Rd

City

Ann Arbor

State

MI

Zip Code

48103-9599

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
VP BCBSM Foundation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3316BD93BD6E4466BAA

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lisa Susin

Mailing Address 42746 Bloomingdale

City

Sterling Heights

State

MI

Zip Code

48314-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AB95A8F79328B4E358A8

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Dean Swanson

Mailing Address 86 Webb St

City

Troy

State

MI

Zip Code

48098-4632

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A59D47ACB91644A23BDD

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Laurine Symula Parmely

Mailing Address 5772 Martell Drive

City

Troy

State

MI

Zip Code

48085-3160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE0C87324F0F94D1E9DD

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Laverne Tarver

Mailing Address 35759 N Grandview Ct

City

Farmington Hills

State

MI

Zip Code

48335-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A53A76452D1B24D0CAF4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Richard Theisen

Mailing Address 23250 Cheltenham Ln

City

Dearborn Heights

State

MI

Zip Code

48127-2365

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6182B088BF0B4EB5919

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Matthew Thibaudeau

Mailing Address 44486 Copland Lane

City

Novi

State

MI

Zip Code

48375-1574

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir - Perform Transform

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A8163EA71A13347138E3

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Stefanie Thornton

Mailing Address 13449 Diegel Dr

City

Shelby Township

State

MI

Zip Code

48315-1342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director- Talent Acq

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A513119363E6B4801AF6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Lawrence Tomenello

Mailing Address 38040 Huron Pointe Dr

City

Harrison Township

State

MI

Zip Code

48045-2831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AC3B55AD5670B49DAAA4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Joann Topa

Mailing Address 4944 Lagoons Circle

City

West Bloomfield

State

MI

Zip Code

48323-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Director, Information Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A21E0FF16737A4F89B77

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

787.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan Tousignant

Mailing Address 21620 River Ridge Trail

City

Farmington Hills

State

MI

Zip Code

48335-4621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A460181A6061C418A962

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Debra Trezil

Mailing Address 17560 White Pine Ct

City

Northville

State

MI

Zip Code

48168-4358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1170D815275A444A98D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Rand Urbin

Mailing Address 28202 Armanda Drive

City

Warren

State

MI

Zip Code

48088-4345

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A076EB80694DC42D59AA

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Diane Valade

Mailing Address 12927 LaSalle Ln

City

Huntington Woods

State

MI

Zip Code

48070-1045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AFA070C2761E7435A974

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Mary Van Tiem

Mailing Address 805 Leinster

City

Rochester Hills

State

MI

Zip Code

48309-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director Asst Gen Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A7D38CB352E124EA4BD9

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Michelle VanTorre-Tellier

Mailing Address 2065 Wilshire Dr SE

City

Grand Rapids

State

MI

Zip Code

49506-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A8805B01427BE439D8E3

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$20.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1014.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lisa Varnier

Mailing Address 4139 Wakefield

City

Berkley

State

MI

Zip Code

48072-3463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A58AE90A91B20483AA83

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Greg Vartanoff

Mailing Address 22359 Woodstock Ct

City

Woodhaven

State

MI

Zip Code

48183-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A537DBCE1BFD54AE0BA0

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Brian Vestergaard

Mailing Address 2729 Toby Dr

City

Brighton

State

MI

Zip Code

48114-8949

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation

VP Product and Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A06299603284F4E77B8A

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$20.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1014.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kirk Vogelei

Mailing Address 1304 Kinlock

City

Troy

State

MI

Zip Code

48098-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3AE2669C5990457BA3C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Equilla Wainwright

Mailing Address 200 River Place Dr
Apt 29

City

Detroit

State

MI

Zip Code

48207-4464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Diversity and Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A50BE44E556D3462E8E0

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Cassandra Walker

Mailing Address 8963 Morning Mist Dr

City

Clarkston

State

MI

Zip Code

48348-2871

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager-account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3C3613D6C21640C9824

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1196.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Laura Walker

Mailing Address 26192 Summerdale Dr
Bldg 12 Unit 92

City State Zip Code
Southfield MI 48033-6135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Dir - Human Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD0698A694BB840CFB1A

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Donna Waller

Mailing Address 894 Avon Court

City State Zip Code
Grosse Pointe Wood MI 48236-1239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A724BB0C16A1D4F59A0D

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Sandra Walther

Mailing Address 2755 Lanergan Dr

City State Zip Code
Troy MI 48084-1020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA58A52F5D352478A8B5

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Carolynn Walton

Mailing Address 5835 Pinecroft Dr.

City

West Bloomfield

State

MI

Zip Code

48322-1669

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A92BC62A9A09942FCAF8

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Nancy Wanchik

Mailing Address 38669 Mystic Ct

City

Farmington Hills

State

MI

Zip Code

48331-5981

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

VP BCBSM and CEO Medicaid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A46302EFEBB4846B39D5

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Ray Warner

Mailing Address 50707 Otter Creek

City

Shelby Township

State

MI

Zip Code

48317-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AEB1F301A349D43FD817

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1547.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Larry Watson

Mailing Address 2462 Coe Court

City

Perrysburg

State

OH

Zip Code

43551-5623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3272EB15B5F048D28FC

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Eva Wendt

Mailing Address 3692 Watuga St

City

Commerce Township

State

MI

Zip Code

48390-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Subsidiary Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9F47715BED014C0C841

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Laurie Wesolowicz

Mailing Address 17455 Maple Hill Dr

City

Northville

State

MI

Zip Code

48168-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A5375112B090B4DDDB5F

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1053.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gretchen White

Mailing Address 4165 Dallas

City

Holt

State

MI

Zip Code

48842-1735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AFED18FF0097C4B10A57

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Angela Williams

Mailing Address 4943 Peachtree Dr

City

Sterling Heights

State

MI

Zip Code

48310-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A973A57B9183C4BCE803

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Richard Williams

Mailing Address 43971 Columbia Dr

City

Clinton Township

State

MI

Zip Code

48038-1327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A0378727D1D87491DAF4

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Deidra Wilson

Mailing Address 3031 Crofton Dr

City

Dewitt

State

MI

Zip Code

48820-7770

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE6ED59D8262D498284D

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kathryn Wilson

Mailing Address 1361 Palmer

City

Plymouth

State

MI

Zip Code

48170-2069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A84D9B7F87D2B45CCB3E

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Patricia Wilson

Mailing Address 597 Dresden Place

City

St Clr Bch

State

ON

Zip Code

N8N 4-4322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3FEB3CBB713643989D1

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Gregory Wilson

Mailing Address P O BOX 252462

City

West Bloomfield

State

MI

Zip Code

48325-2462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A464C2B0A01D541D0968

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**B.**

Full Name (Last, First, Middle Initial)

Lablance Winder

Mailing Address 32001 Concord Dr
Apt G

City

Madison Heights

State

MI

Zip Code

48071-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: A5509878CF9894F54AD6

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly**C.**

Full Name (Last, First, Middle Initial)

Dennis Winkler

Mailing Address 2888 Kilburn Ct

City

Rochester Hills

State

MI

Zip Code

48306-3025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
MichiganOccupation
Director Technical Prog Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: AA7DDDA5AAE004E5DAF6

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kathryn Winters

Mailing Address 6423 Munger Road

City

Ypsilanti

State

MI

Zip Code

48197-9014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AD2D5076CA02A4FDAA4B

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Jeffrey Witzburg

Mailing Address 9650 Winterset Circle

City

Plymouth

State

MI

Zip Code

48170-3273

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC9C7C9C095664D6182E

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kathleen Wodecki

Mailing Address 7640 Barnsbury

City

West Bloomfield

State

MI

Zip Code

48324-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: ABFDB4813BDAB477EB5A

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

702.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Diane Wolfenden

Mailing Address 34397 Orsini Dr.

City

Sterling Heights

State

MI

Zip Code

48312-5773

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A92986A8CAD3D480490C

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Ronald Wood

Mailing Address 29225 Lake Park

City

Farmington Hills

State

MI

Zip Code

48331-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
VP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A14B8C8F1480147ACA41

Amount of Each Receipt this Period

585.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Kathryn Woodyard

Mailing Address 5069 Glendurgan Ct

City

Holt

State

MI

Zip Code

48842-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AA82D7779D05947F4828

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1339.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Robin Wright King

Mailing Address 18551 Santa Ann

City

Lathrup Village

State

MI

Zip Code

48076-4573

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A1B1334910ABA42019F9

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Joanne Wright

Mailing Address 42564 White Hart Blvd

City

Canton

State

MI

Zip Code

48188-2665

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Physician Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 1

Transaction ID: A2413AC11B2674206894

Amount of Each Receipt this Period

696.00

C.

Full Name (Last, First, Middle Initial)

Yan Yang

Mailing Address 17922 Ridgeview Dr

City

Northville

State

MI

Zip Code

48168-8566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation
Product Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A9BAC268DDA8147248EE

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1164.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Pamela Yanis

Mailing Address 905 Blairmoor Ct

City

Grosse Pointe Wood

State

MI

Zip Code

48236-1244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Sr Dir Prvdr Consultg Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AC996C875C8214DADB3F

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Kathleen Young

Mailing Address 1217 Naples Court

City

Ann Arbor

State

MI

Zip Code

48103-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Dir Med Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A3BD16CBC394B4791A12

Amount of Each Receipt this Period

377.00

Payroll Deduction: \$29.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Richard Zapala

Mailing Address 1915 Creek Landing

City

Haslett

State

MI

Zip Code

48840-8704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Assistant General Counsel IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A6DE8C10C96FB468D85F

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1073.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Matthew Zelman

Mailing Address 633 S Dorchester Ave

City

Royal Oak

State

MI

Zip Code

48067-4047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
Michigan

Occupation

Project Mgr Product Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A4BCC4054F8034BC2873

Amount of Each Receipt this Period

234.00

Payroll Deduction: \$18.00-
/Bi-Weekly

B.

Full Name (Last, First, Middle Initial)

Richard Znidarsic

Mailing Address 14970 Forest Hill Road

City

Grand Ledge

State

MI

Zip Code

48837-9223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

VP, Information Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A884AD51700D64CCD800

Amount of Each Receipt this Period

495.00

Payroll Deduction: \$45.00-
/Bi-Weekly

C.

Full Name (Last, First, Middle Initial)

Dan Zolkowski

Mailing Address 1841 Ridgewood Drive

City

East Lansing

State

MI

Zip Code

48823-2939

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Assistant General Counsel li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: A7DC8FFCB27104B6FABE

Amount of Each Receipt this Period

319.00

Payroll Deduction: \$29.00-
/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)

1048.00

TOTAL This Period (last page this line number only)

155567.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 223

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
House Republican Campaign Committee

Mailing Address P.O. Box 15035

City State Zip Code
Lansing MI 48901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 1 1

Transaction ID: ADB54EEB71A5D4504B0F

Amount of Each Receipt this Period

1000.00

Refund of Contribution made

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 223

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.21

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: A00A47C02DE264E198F1

Amount of Each Receipt this Period

104.75

Interest Earned

B.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.56

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: AF197B24098754901854

Amount of Each Receipt this Period

117.35

Interest Earned

C.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.74

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: AD996D076CAA4437A93B

Amount of Each Receipt this Period

104.18

Interest Earned

SUBTOTAL of Receipts This Page (optional)

326.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 223

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: A5E2E406454BC409FB91

Amount of Each Receipt this Period

103.92

Interest Earned

B.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.70

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: AE995A835DC934E29A74

Amount of Each Receipt this Period

108.04

Interest Earned

SUBTOTAL of Receipts This Page (optional)

211.96

TOTAL This Period (last page this line number only)

538.24

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 154 / 223

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Americas Leadership Pac</p> <hr/> <p>Mailing Address 607 14th Street Nw Suite 800</p> <hr/> <p>City Washington State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement Contribution to Federal PAC</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B522502A4759F478F95E</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) BENISHEK FOR CONGRESS, INC.</p> <hr/> <p>Mailing Address PO BOX 1012</p> <hr/> <p>City KINGSFORD State MI Zip Code 49802</p> <hr/> <p>Purpose of Disbursement Dan Benishek, US House, Federal Candidate</p> <hr/> <p>Candidate Name Dan Benishek</p> <hr/> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01</p> <hr/> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5BAC3087063442D3B70</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Candice Miller For Congress</p> <hr/> <p>Mailing Address P.o. Box 791</p> <hr/> <p>City Mt. Clemens State MI Zip Code 48046</p> <hr/> <p>Purpose of Disbursement Candice Miller, US House, Federal Candidate</p> <hr/> <p>Candidate Name Rep. Candice Miller</p> <hr/> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10</p> <hr/> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B21D2634841F04338918</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Candicepac

Mailing Address P.o. Box 65796

City
Washington

State
DC

Zip Code
20035

Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B4E9BD057E5C94E498EA

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAM-PAC)

Mailing Address 5915 Eastman Avenue Suite 100

City
Midland

State
MI

Zip Code
48640

Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B619377AE638C485BAB8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Dave Camp For Congress

Mailing Address 5915 Eastman Ave. Suite 100
5915 Eastman Ave. Suite 100

City
Midland

State
MI

Zip Code
48640

Purpose of Disbursement
Dave Camp, US House, Federal Candidate

Candidate Name
Rep. Dave Camp

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: B5BAD77B2A5734E8E9F8

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Blue Cross Blue Shield of Michigan PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

HUIZENGA FOR CONGRESS

Mailing Address 441 WILLIAM COURT

City
ZEELANDState
MNZip Code
49464Purpose of Disbursement
Contribution to Federal CandidateCandidate Name
William P HuizengaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 02

Transaction ID: B7404D0B33B19438C92C

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	1	1

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

John D Dingell For Congress Committee

Mailing Address 607 Fourteenth Street Nw

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
John Dingell, US House, Federal CandidateCandidate Name
Rep. John D. DingellCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: BAF0E846A07EB4910B26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	1	1

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Levin For Congress Committee

Mailing Address P.o. Box 1092

City
WarrenState
MIZip Code
48092Purpose of Disbursement
Contribution to Federal CandidateCandidate Name
Rep. Sandy LevinCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: B1481B75B4C134644B2C

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michigan Republican Party - Fedral Acct.

Mailing Address 520 Seymour St.

City State Zip Code
Lansing MI 48933Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6D382875F6034079B79

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	1

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Mike R Fund

Mailing Address P.o. Box 65796

City State Zip Code
Washington DC 20035Purpose of Disbursement
Contribution to Federal PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Other2011

Transaction ID: BA2468016895F4767A34

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Peters For Congress

Mailing Address Po Box 226

City State Zip Code
Bloomfield Hills MI 48303Purpose of Disbursement
Gary Peters, US House, Federal CandidateCandidate Name
Rep. Gary PetersCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: BE4F71E89A87A4C20B11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rogers For Congress</p> <p>Mailing Address Post Office Box 581 Post Office Box 581</p> <p>City Brighton State MI Zip Code 48116</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Mike Rogers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B400F30CCB2334D7DB71</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>2000.00</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rogers For Congress</p> <p>Mailing Address Post Office Box 581 Post Office Box 581</p> <p>City Brighton State MI Zip Code 48116</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Mike Rogers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE32CFD10CA7843698BD</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>2500.00</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS</p> <p>Mailing Address 228 S. WASHINGTON STREET SUITE 115</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution to Federal PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC586246128434F9B848</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 9 / 2 0 1 1</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>5000.00</div> </div> </p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

9500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Upton For All Of Us

Mailing Address Po Box 490

City
St Joseph

State
MI

Zip Code
49085

Purpose of Disbursement
Fred Upton, US House, Federal Candidate

Candidate Name
Rep. Fred Upton

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 06

Transaction ID: BDAE78D260A814FD3B19

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Upton For All Of Us

Mailing Address Po Box 490

City
St Joseph

State
MI

Zip Code
49085

Purpose of Disbursement
Fred Upton, US House, Federal Candidate

Candidate Name
Rep. Fred Upton

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 06

Transaction ID: B7657CC28BF3B433A84B

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

63500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Al Pscholka for State Rep

Mailing Address 5810 Longhorn Trail

City State Zip Code
Stevensville MI 49127

Purpose of Disbursement
Al Pscholka, State House, 79th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B6043D4F25B7B46B6A77

Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Al Pscholka for State Rep

Mailing Address 5810 Longhorn Trail

City State Zip Code
Stevensville MI 49127

Purpose of Disbursement
Al Pscholka, State House, 79th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B285221AC3DC94A778A5

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Amanda Price for Rep Cmte

Mailing Address 3975 Lakeridge Drive

City State Zip Code
Holland MI 49424

Purpose of Disbursement
Amanda Price, State House, 89th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BDFA690F830E244A0B96

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ananich Future Fund

Mailing Address 932 Maxine Street

City State Zip Code
Flint MI 48503

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B96C27126C1A54519A19

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Aric Nesbitt for State Representative

Mailing Address PO Box 400

City State Zip Code
Lawton MI 49065

Purpose of Disbursement
Aric Nesbitt, State House, 80th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B6D3453ACE55743C1BA2

Date of Disbursement

03 / 22 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Barb Byrum for State Representative

Mailing Address PO Box 27344

City State Zip Code
Lansing MI 48909

Purpose of Disbursement
Barb Byrum, State House, 67th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B55EB52B107564771A19

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 163 / 223

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ben Glardon for State Representative

Mailing Address PO Box 1746

City
Owosso

State
MI

Zip Code
48867

Purpose of Disbursement

Ben Glardon, State House, 85th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B65069E1112B6410F870

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Bill Rogers For State Representative

Mailing Address 4878 Pine Eagles Ct

City
Brighton

State
MI

Zip Code
48116

Purpose of Disbursement

Bill Rogers, State House, 66th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BCA5998AC029F43E2ABD

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 1 1

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Bill Schuette for Attorney General

Mailing Address PO Box 27188

City
Lansing

State
MI

Zip Code
48909

Purpose of Disbursement

Bill Schuette, Attorney General, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B688BBD9C6B484FDD9FB

Date of Disbursement

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Bob Constan For State Representative

Mailing Address 5527 Heather Lane

City Dearborn Hts. State MI Zip Code 48125

Purpose of Disbursement
Bob Constan, State House, 16th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: BE0030086233347E1A91

Date of Disbursement

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Bob Genetski For State Representative

Mailing Address 787 Pine Ave

City Holland State MI Zip Code 49423

Purpose of Disbursement
Bob Genetski, State House, 88th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B017727ED2B324741BA5

Date of Disbursement

M M / D D / Y Y Y Y
 0 2 / 1 5 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Bolger Restore Michigan Fund

Mailing Address 409 Smith

City Lansing State MI Zip Code 48910

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B9EC4A506E98E401A85F

Date of Disbursement

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 1 1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Bruce Caswell For Senate	Transaction ID: B77960FD209FD465D837 Date of Disbursement
Mailing Address 8940 E. Bacon Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 1 1</div> </div>
City Hillsdale State MI Zip Code 49242 Purpose of Disbursement Bruce Caswell, State Senate, 16th District, MI Candidate Name	Amount of Each Disbursement this Period <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 1 1</div> </div>
B. Full Name (Last, First, Middle Initial) Brunner for State Representative	Transaction ID: B5ECFB1D702D246EC9A9 Date of Disbursement
Mailing Address 208 Murphy Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 1 1</div> </div>
City Bay City State MI Zip Code 48706 Purpose of Disbursement Charles Brunner, State House, 96th District, MI Candidate Name	Amount of Each Disbursement this Period <div>300.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 6 / 2 0 1 1</div> </div>
C. Full Name (Last, First, Middle Initial) Brunner for State Representative	Transaction ID: BDD56E94D27FC4A039F1 Date of Disbursement
Mailing Address 208 Murphy Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 6 / 2 0 1 1</div> </div>
City Bay City State MI Zip Code 48706 Purpose of Disbursement Charles Brunner, State House, 96th District, MI Candidate Name	Amount of Each Disbursement this Period <div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Burton Leland For Detroit

Mailing Address 17254 Bentler

City	State	Zip Code
Detroit	MI	48219

Purpose of Disbursement
Burton Leland, Wayne County Commissioner, Local, MI

Candidate Name

Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012

Transaction ID: B7971644457714F56A97

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	1

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Charles Smiley for State Rep

Mailing Address 2253 McLaren

City	State	Zip Code
Burton	MI	48529

Purpose of Disbursement
Charles Smiley, State House, 50th District, MI

Candidate Name

Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012

Transaction ID: B527D64A5E00F4504A42

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	1	1

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Charles Smiley for State Rep

Mailing Address 2253 McLaren

City	State	Zip Code
Burton	MI	48529

Purpose of Disbursement
Charles Smiley, State House, 50th District, MI

Candidate Name

Category/ Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	2012
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012

Transaction ID: B7D9F96B85F51481ABC6

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Charles Smiley for State Rep

Mailing Address 2253 McLaren

City State Zip Code
Burton MI 48529

Purpose of Disbursement
Charles Smiley, State House, 50th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: BEEDFDBF74AFE4EB8B96

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Chuck Moss For State Representative

Mailing Address 1184 Dorchester

City State Zip Code
Birmingham MI 48009

Purpose of Disbursement
Chuck Moss, State House, 40th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: BB6F1EA5142864046ADB

Date of Disbursement

02 / 24 / 2011

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Cindy Denby For State Rep Comm

Mailing Address 9787 Amanda Drive

City State Zip Code
Fowlerville MI 48836

Purpose of Disbursement
Cindy Denby, State House, 47th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: BE87DD93034FF4FF2818

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Citizens for Andrea LaFonataine

Mailing Address PO Box 6

City
Memphis

State
MI

Zip Code
48041

Purpose of Disbursement

Andrea Lafontaine, State House, 32nd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BF2458DDC3938412A8D5

Date of Disbursement

M M / D D / Y Y Y Y
03 / 15 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Citizens For Glenn S. Anderson

Mailing Address 34300 Park Grove Dr.

City
Westland

State
MI

Zip Code
48185

Purpose of Disbursement

Glenn Anderson, State Senate, 6th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BEDF962292ADC43D1B4A

Date of Disbursement

M M / D D / Y Y Y Y
04 / 26 / 2011

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Citizens For John J. Gleason

Mailing Address 2617 Macomber

City
Flint

State
MI

Zip Code
48503

Purpose of Disbursement

John Gleason, State Senate, 27th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2014

Transaction ID: BC7C8E1E9D0C94BF1ACE

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Citizens For John J. Gleason

Mailing Address 2617 Macomber

City State Zip Code
Flint MI 48503

Purpose of Disbursement
John Gleason, State Senate, 27th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2014

Transaction ID: B8E2A3B91A3F64989945

Date of Disbursement

06 / 03 / 2011

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Citizens for Margaret OBrien

Mailing Address 1625 Bellaire

City State Zip Code
Portage MI 49024

Purpose of Disbursement
Margaret O'Brien, State House, 61st District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: BD7908F5E6AF34BEBA8C

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Citizens Supporting Mike Nofs for State Senate

Mailing Address 5420 BECKLEY RD PMB 350

City State Zip Code
BATTLE CREEK MI 49015

Purpose of Disbursement
Mike Nofs, State Senate, 19th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2014

Transaction ID: BB7C56036CBBB4377A21

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Citizens Supporting Mike Nofs for State Senate	Transaction ID: B484F5845CF974DE99F9 Date of Disbursement
Mailing Address 5420 BECKLEY RD PMB 350	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code BATTLE CREEK MI 49015 Purpose of Disbursement Mike Nofs, State Senate, 19th District, MI Candidate Name	Amount of Each Disbursement this Period <div>600.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Citizens Supporting Mike Nofs for State Senate	Transaction ID: BCD62E32EC6CD4D83927 Date of Disbursement
Mailing Address 5420 BECKLEY RD PMB 350	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code BATTLE CREEK MI 49015 Purpose of Disbursement Mike Nofs, State Senate, 19th District, MI Candidate Name	Amount of Each Disbursement this Period <div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Citizens Supporting Tory Rocca	Transaction ID: B252C5001C02F44FFADE Date of Disbursement
Mailing Address 12481 Starlite Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 1 1</div> </div>
City State Zip Code Sterling Heights MI 48312 Purpose of Disbursement Tory Rocca, State Senate, 10th District, MI Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Citizens to Elect Deb Shaughnessy

Mailing Address 956 Chads Way

City State Zip Code
Charlotte MI 48813

Purpose of Disbursement
Deb Shaughnessy, State House, 71st District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B348E58C DFA364DD4879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Citizens to Elect Deb Shaughnessy

Mailing Address 956 Chads Way

City State Zip Code
Charlotte MI 48813

Purpose of Disbursement
Deb Shaughnessy, State House, 71st District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B04B8C0A0483D4EB2820

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Comm. To Elect Jack Brandenburg Senate

Mailing Address 25 Eldredge

City State Zip Code
Mt Clemens MI 48043

Purpose of Disbursement
Jack Brandenburg, State Senate, 11th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2014

Transaction ID: B4866AD8DA9CD45DAAC0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Comm. To Elect Jack Brandenburg Senate

Mailing Address 25 Eldredge

City State Zip Code
Mt Clemens MI 48043

Purpose of Disbursement
Jack Brandenburg, State Senate, 11th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Transaction ID: BE252BDB4181945EEB04

Date of Disbursement

05 / 10 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Jon Bumstead

Mailing Address 2186 E 72nd Street

City State Zip Code
Newaygo MI 49337

Purpose of Disbursement
Jon Bumstead, State House, 100th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B1DF7339F8B5143A49C1

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Jon Bumstead

Mailing Address 2186 E 72nd Street

City State Zip Code
Newaygo MI 49337

Purpose of Disbursement
Jon Bumstead, State House, 100th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B2C7C0DFF12434123A8E

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee To Elect Andrew J Kandreas	Transaction ID: BABC9D71CE5B747D28BD Date of Disbursement
Mailing Address 13400 Dix-toledo Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 1 1</div> </div>
City State Zip Code Southgate MI 48195 Purpose of Disbursement Andrew Kandreas, State House 13th District, MI Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Committee to Elect Bert Johnson State Senate	Transaction ID: BB1D514A0B754441C912 Date of Disbursement
Mailing Address 36 Eason	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 2 / 2 0 1 1</div> </div>
City State Zip Code Highland Park MI 48203 Purpose of Disbursement Bert Johnson, State Senate, 2nd District, MI Candidate Name	Amount of Each Disbursement this Period <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Committee to Elect Bradford Jacobsen	Transaction ID: B5409EF5789C74DF5B50 Date of Disbursement
Mailing Address PO Box 250	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code Oxford MI 48371 Purpose of Disbursement Bradford Jacobsen, State House, 46th District, MI Candidate Name	Amount of Each Disbursement this Period <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Bradford Jacobsen	Transaction ID: B15EA94EAE2BC4012B37 Date of Disbursement
Mailing Address PO Box 250	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 6 / 2 0 1 1</div> </div>
City Oxford State MI Zip Code 48371	Amount of Each Disbursement this Period <div>250.00</div>
Purpose of Disbursement Bradford Jacobsen, State House, 46th District, MI Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Committee to Elect Bradford Jacobsen	Transaction ID: B937EDFDE98DF462C96B Date of Disbursement
Mailing Address PO Box 250	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 1 1</div> </div>
City Oxford State MI Zip Code 48371	Amount of Each Disbursement this Period <div>150.00</div>
Purpose of Disbursement Bradford Jacobsen, State House, 46th District, MI Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Committee to Elect Christopher Sain	Transaction ID: B01B95273615D4044B6D Date of Disbursement
Mailing Address 1966 Buron Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div>
City Grand Rapids State MI Zip Code 49506	Amount of Each Disbursement this Period <div>500.00</div>
Purpose of Disbursement CHristopher Sain, Board of Ed, Local Candidate, MI Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Dale W. Zorn

Mailing Address PO Box 2

City

Ida

State

MI

Zip Code

48140

Purpose of Disbursement

Dale Zorn, State House, 56th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BF1B61335EC2F46C39D9

Date of Disbursement

M M / D D / Y Y Y Y
03 / 23 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Committee To Elect David Nathan

Mailing Address 18701 Grand River
#270

City

Detroit

State

MI

Zip Code

48223

Purpose of Disbursement

David Nathan, State House, 11th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B104452726C3A4286A5D

Date of Disbursement

M M / D D / Y Y Y Y
02 / 23 / 2011

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Ed McBroom

Mailing Address N873 Thaler Drive

City

Vulcan

State

MI

Zip Code

49892

Purpose of Disbursement

Ed McBroom, State House, 108th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B8282AF9B22494FFC90C

Date of Disbursement

M M / D D / Y Y Y Y
02 / 17 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee To Elect Gail Haines

Mailing Address Po Box 301085

City State Zip Code
Waterford MI 48330

Purpose of Disbursement
Gail Haines, State House, 43rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B6F91A10AE8BB41A4983

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

B. Full Name (Last, First, Middle Initial)
Committee to Elect Greg MacMaster

Mailing Address 5966 Beaver Creek Trail

City State Zip Code
Kewadin MI 49648

Purpose of Disbursement
Greg MacMaster, State House, 105th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BA9C4D5015C394AC1B98

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Committee to Elect Harvey Santana

Mailing Address 5700 Brace

City State Zip Code
Detroit MI 48228

Purpose of Disbursement
Harvey Santana, State House, 10th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B16ADD56DF556425187B

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee To Elect Jase Bolger

Mailing Address Po Box 638

City Marshall State MI Zip Code 49068

Purpose of Disbursement
Jase Bolger, State House, 63rd District, MI
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B5509FAB8CCE24DCC84D

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Committee to Elect Joel Johnson

Mailing Address PO Box 280

City Clare State MI Zip Code 48617

Purpose of Disbursement
Joel Johnson, State House, 97th District, MI
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: BECE561D7176643D68AB

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

750.00

C. Full Name (Last, First, Middle Initial)
Committee to Elect Joel Johnson

Mailing Address PO Box 280

City Clare State MI Zip Code 48617

Purpose of Disbursement
Joel Johnson, State House, 97th District, MI
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B7114E5BA1D0F43D5A2C

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Ken Goike

Mailing Address 22440 32 Mile

City
Ray

State
MI

Zip Code
48096

Purpose of Disbursement

Ken Goike, State House, 33rd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BC6675D25EFD841B1BDF

Date of Disbursement

02 / 23 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Kurt Damrow State Rep 84th District

Mailing Address 1031 PT Austin Road

City
Port Austin

State
MI

Zip Code
48467

Purpose of Disbursement

Kurt Damrow, State House, 84th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B9B0EBCFA3E5E405E865

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Kurt Heise

Mailing Address PO Box 70212

City
Plymouth

State
MI

Zip Code
48170

Purpose of Disbursement

Kurt Heise, State House, 20th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BC1ACCEED115A401ABC8

Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee To Elect Lesia Liss	Transaction ID: BD487468ABA4947169F1 Date of Disbursement
Mailing Address 27472 Haverhill Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 1</div> </div>
City Warren State MI Zip Code 48092	Amount of Each Disbursement this Period
Purpose of Disbursement Lesia Liss, State House, 28th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
B. Full Name (Last, First, Middle Initial) Committee to Elect Lisa Howze	Transaction ID: B8BA4C7E0C098487B855 Date of Disbursement
Mailing Address 2550 W Grand Blvd Ste. 101	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 1 1</div> </div>
City Detroit State MI Zip Code 48208	Amount of Each Disbursement this Period
Purpose of Disbursement Lisa Howze, State House, 2nd District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
C. Full Name (Last, First, Middle Initial) Committee to Elect Mark Ouimet	Transaction ID: BEEAAECFCB0C54F8AABD Date of Disbursement
Mailing Address 310 N. Main Street Suite 160	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 1 1</div> </div>
City Chelsea State MI Zip Code 48118	Amount of Each Disbursement this Period
Purpose of Disbursement Mark Ouimet, State House, 52nd District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
SUBTOTAL of Disbursements This Page (optional)	<div>1500.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Maureen Stapleton	Transaction ID: BEC92150D35AE40F69D7 Date of Disbursement
Mailing Address 1300 East Lafayette #1207	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 1 1</div> </div>
City State Zip Code Detroit MI 48207	Amount of Each Disbursement this Period
Purpose of Disbursement Maureen Stapleton, State House 4th District, MI Candidate Name	<div> <div>250.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
B. Full Name (Last, First, Middle Initial) Committee to Elect Mike Shirkey	Transaction ID: BD03E500280614ED6A44 Date of Disbursement
Mailing Address 11757 Sutfin Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 1 / 2 0 1 1</div> </div>
City State Zip Code Clarklake MI 49234	Amount of Each Disbursement this Period
Purpose of Disbursement Mike Shirkey, State House, 65th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
C. Full Name (Last, First, Middle Initial) Committee To Elect Peter Lund State Rep	Transaction ID: BFD0232ED13B4424D806 Date of Disbursement
Mailing Address 6881 Muirfield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code Shelby Twp MI 48316	Amount of Each Disbursement this Period
Purpose of Disbursement Peter Lund, State House, 36th District, MI Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Peter MacGregor

Mailing Address 8209 Vista Royale Lane

City State Zip Code
Rockford MI 49341

Purpose of Disbursement
Peter MacGregor, State House, 73rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B3AEB8A42E7F4A28AEB

Date of Disbursement

02 / 23 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Peter MacGregor

Mailing Address 8209 Vista Royale Lane

City State Zip Code
Rockford MI 49341

Purpose of Disbursement
Peter MacGregor, State House, 73rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B2586F798EE714601861

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Peter Pettalia

Mailing Address 11617 Bell Ray Road

City State Zip Code
Presque Isle MI 49707

Purpose of Disbursement
Peter Pettalia, State House, 106th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B187D762C8275402CB5B

Date of Disbursement

05 / 05 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee To Elect Ray Franz State Repre	Transaction ID: BBCCD11751F894383934 Date of Disbursement
Mailing Address Po Box 25	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 1 1</div> </div>
City Onekama State MI Zip Code 49675 Purpose of Disbursement Ray Franz, State House, 101st District, MI Candidate Name	Amount of Each Disbursement this Period <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 1 1</div> </div>
B. Full Name (Last, First, Middle Initial) Committee To Elect Richard Leblanc	Transaction ID: BDB1870519C1F45FA8C3 Date of Disbursement
Mailing Address 36267 Canyon Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 1 1</div> </div>
City Westland State MI Zip Code 48186 Purpose of Disbursement Richard LeBlanc, State House, 18th District, MI Candidate Name	Amount of Each Disbursement this Period <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 8 / 2 0 1 1</div> </div>
C. Full Name (Last, First, Middle Initial) Committee to Elect Stacy Erwin Oakes	Transaction ID: BD2628401214249E8BDD Date of Disbursement
Mailing Address 3309 Carter Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 8 / 2 0 1 1</div> </div>
City Saginaw State MI Zip Code 48601 Purpose of Disbursement Stacey Erwin Oakes, State House, 95th District, MI Candidate Name	Amount of Each Disbursement this Period <div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	<div>1500.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee To Elect Steve Lindberg

Mailing Address P.o. Box 109

City
Marquette

State
MI

Zip Code
49855

Purpose of Disbursement

Steve Lindberg, State House, 109th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B5FA6792CDB3447F6B0F

Date of Disbursement

06 / 09 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Steven Bieda Senator

Mailing Address PO BOX 1311

City
WARREN

State
MI

Zip Code
48090

Purpose of Disbursement

Steven Bieda, State Senate, 9th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: B00A1FFCE8337448D90C

Date of Disbursement

03 / 15 / 2011

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Thomas Stallworth

Mailing Address 18684 Whitcomb

City
Detroit

State
MI

Zip Code
48235

Purpose of Disbursement

Thomas Stallworth, State House, 8th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BE730809E08F943EE83D

Date of Disbursement

05 / 11 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Tom Hooker

Mailing Address PO Box 454

City Byron Center State MI Zip Code 49315

Purpose of Disbursement
Tom Hooker, State House, 77th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B0552391F392746968B6

Date of Disbursement

04 / 18 / 2011

Amount of Each Disbursement this Period

700.00

B. Full Name (Last, First, Middle Initial)
Committee to Elect Walt Gutowski

Mailing Address 404 Bridge Street, NW

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement
Walt Gutowski, Local Candidate, City Commissioner

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B07530D110C854577A58

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Committee To Retain Elias Lumpkins

Mailing Address 1742 South Hampton Se

City Grand Rapids State MI Zip Code 49508

Purpose of Disbursement
Elias Lumpkins, City Commissioner, Local, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B54E14481DE3A4A9FB50

Date of Disbursement

03 / 28 / 2011

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

2700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Common Sense Leadership Fund

Mailing Address 19980 MAYFIELD

City
Livonia

State
MI

Zip Code
48152

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B8CACC2AC76AC421E86D

Date of Disbursement

04 / 13 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Consensus Pac

Mailing Address 916 W. Ottawa Street
Apt 4

City
Lansing

State
MI

Zip Code
48915

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BC7E0D4D9432546C68C0

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

CTE Anthony Forlini for State Representative

Mailing Address 39723 Chart

City
Harrison Township

State
MI

Zip Code
48045

Purpose of Disbursement
Anthony Forlini, State House, 24th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B248E2DCF267546E697E

Date of Disbursement

03 / 10 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Cte Harold Haugh State Representative #4

Mailing Address 19464 Candlelight

City State Zip Code
Roseville MI 48066

Purpose of Disbursement
Harold Haugh, State House, 42nd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BF97C86F89E574A80B3A

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

400.00

B. Full Name (Last, First, Middle Initial) CTE Jimmy Womack For State Rep

Mailing Address 2310 W. McNichols Road

City State Zip Code
Detroit MI 48221

Purpose of Disbursement
VOID: Check No. 6427, Dated 9/23/10

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2010

Transaction ID: B8C26425F7DAD45618F8

Date of Disbursement

03 / 29 / 2011

Amount of Each Disbursement this Period

-500.00

C. Full Name (Last, First, Middle Initial) CTE Jimmy Womack For State Rep

Mailing Address 2310 W. McNichols Road

City State Zip Code
Detroit MI 48221

Purpose of Disbursement
Jimmy Womack, State House, 7th Dist., MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B050084C9952C4B9EB69

Date of Disbursement

05 / 17 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) CTE Virgil Smith State Senator	Transaction ID: B51655CD13CF34CA9BF0 Date of Disbursement
Mailing Address 20445 Sheffield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 1 1</div> </div>
City State Zip Code Detroit MI 48221	Amount of Each Disbursement this Period
Purpose of Disbursement Virgil Smith, State Senate, 4th District, MI Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) CTE Woodrow Stanley State Rep	Transaction ID: BD986C03FAE8643B997B Date of Disbursement
Mailing Address 2211 Brownell Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 1 1</div> </div>
City State Zip Code Flint MI 48504	Amount of Each Disbursement this Period
Purpose of Disbursement Woodrow Stanley, State House, 34th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Curtis Hertel Jr. For Register Of Deeds	Transaction ID: BE7E3087A235E4F2396C Date of Disbursement
Mailing Address 1818 Cahill Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code East Lansing MI 48823	Amount of Each Disbursement this Period
Purpose of Disbursement Curtis Hertel, Jr., Register of Deeds, Local, MI Candidate Name	<div> <div>250.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dave Bing For Mayor

Mailing Address P.o. Box 31-0058

City State Zip Code
 Detroit MI 48231

Purpose of Disbursement
 Dave Bing, Mayor, Local, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B445B7FB85C0D4A79B20

Date of Disbursement

06 / 09 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Dave Hildenbrand for State Senate

Mailing Address PO Box 1075

City State Zip Code
 Grand Rapids MI 49501

Purpose of Disbursement
 Dave Hildenbrand, State Senate, 29th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2014

Transaction ID: B9C166A6F17574F82905

Date of Disbursement

02 / 15 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Dave Robertson for State Senate

Mailing Address PO Box 181

City State Zip Code
 Grand Blanc MI 48480

Purpose of Disbursement
 Dave Robertson, State Senate, 26th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B4777CC1A57904C9EB85

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
David Rutledge Election Committee

Mailing Address 8585 Durham Court

City Ypsilanti State MI Zip Code 48198

Purpose of Disbursement
David Rutledge, State House, 54th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B04E0C495CD374432B08

Date of Disbursement

05 / 03 / 2011

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Detroit Regional Chamber Pac

Mailing Address P.o. Box 33840

City Detroit State MI Zip Code 48232

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B0D5C291FC81F4B99BEB

Date of Disbursement

06 / 02 / 2011

Amount of Each Disbursement this Period

1575.00

C. Full Name (Last, First, Middle Initial)
Douglas A. Geiss for State Representative

Mailing Address 25680 Greenlawn

City Taylor State MI Zip Code 48180

Purpose of Disbursement
Douglass A. Geiss, State House, 22nd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BC2DF7B6EECF84C78AAB

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

2675.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Elect Jeff Farrington Committee

Mailing Address 8830 Summers Ct

City
Utica

State
MI

Zip Code
48317

Purpose of Disbursement

Jeff Farrington, State House, 30th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B69CDF1FAD76E48F1AC1

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Elect Vicki Barnett

Mailing Address 29271 Glencastle Court

City

Farmington Hills

State
MI

Zip Code
48336

Purpose of Disbursement

Vicki Barnett, State House, 37th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B8ADF10ACB4E0474F8FC

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 1 1

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

FRED DURHAL 2010 COMMITTEE

Mailing Address 5085 UNDERWOOD ST

City
Detroit

State
MI

Zip Code
48204

Purpose of Disbursement

Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B5E274BE1B1D645E886C

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 1 1

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Alberta Tinsley Talabi

Mailing Address 2229 Pennsylvania

City State Zip Code
Detroit MI 48214Purpose of Disbursement
Alberta Tinsley Talabi, State House, 3rd Dist., MI

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State:	District:	Michigan2012	

Transaction ID: B20FDF61185164B4EBA6

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	7	/	2	0	1	1

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends of Brandon Dillon (State Rep)

Mailing Address 1213 LEWISON NE

City State Zip Code
GRAND RAPIDS MI 49505Purpose of Disbursement
Brandon Dillon, State House, 75th District, MI

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State:	District:	Michigan2012	

Transaction ID: BEECB3B64FC2348A9989

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	2	/	2	0	1	1

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Friends of Brandon Dillon (State Rep)

Mailing Address 1213 LEWISON NE

City State Zip Code
GRAND RAPIDS MI 49505Purpose of Disbursement
Brandon Dillon, State House, 75th District, MI

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State:	District:	Michigan2012	

Transaction ID: B49A589CE5D484922AA8

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	1	1

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Darwin L Booher Mailing Address PO Box 971	Transaction ID: BF219CEC3E71643C29B5 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 1 1</div> </div>
City State Zip Code Evert MI 49631 Purpose of Disbursement Darwin Booher, State Senate, 35th District, MI Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Michigan2014	Amount of Each Disbursement this Period <div>1000.00</div>
B. Full Name (Last, First, Middle Initial) Friends Of Eileen Kowall Mailing Address 2333 Cumberland Road City State Zip Code White Lake MI 48383 Purpose of Disbursement Eileen Kowall, State House, 44th District, MI Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Michigan2012	Transaction ID: BD6472C19BB0042F8B60 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 6 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>500.00</div>
C. Full Name (Last, First, Middle Initial) Friends of Holly Hughes Mailing Address 8801 Lehman City State Zip Code Montague MI 49437 Purpose of Disbursement Holly Hughes, State House, 91st District, MI Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Michigan2012	Transaction ID: B6173F82114F6472C9B3 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 9 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>250.00</div>
SUBTOTAL of Disbursements This Page (optional)	<div>1750.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Jim Ananich

Mailing Address 932 Maxine

City State Zip Code
Flint MI 48503

Purpose of Disbursement
Jim Ananich, State House, 49th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BBFD3D42056A343A982E

Date of Disbursement

03 / 24 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends of Jim Townsend

Mailing Address PO Box 213

City State Zip Code
Royal Oak MI 48068

Purpose of Disbursement
Jim Townsend, State House, 26th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B2A1EABE8A4974655AE6

Date of Disbursement

04 / 26 / 2011

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Friends of Jim Townsend

Mailing Address PO Box 213

City State Zip Code
Royal Oak MI 48068

Purpose of Disbursement
Jim Townsend, State House, 26th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B6687896A732649F097B

Date of Disbursement

06 / 15 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends Of Jon Switalski

Mailing Address 31705 Forest Lane

City
Warren

State
MI

Zip Code
48093

Purpose of Disbursement
Jon Switalski, State House, 25th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B1FCACF32828A4476822

Date of Disbursement

M M / D D / Y Y Y Y
03 / 08 / 2011

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Kate Segal

Mailing Address 108 Pinehurst Lane

City
Battle Creek

State
MI

Zip Code
49015

Purpose of Disbursement
Kate Segal, State House, 62nd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B92524AF8396B4938B7D

Date of Disbursement

M M / D D / Y Y Y Y
05 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Friends Of Ken Cockrel, Jr.

Mailing Address 4815 Avery

City
Detroit

State
MI

Zip Code
48208

Purpose of Disbursement
Ken Cockrel, Detroit City Council, Local, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B5F270F62F1024299BD7

Date of Disbursement

M M / D D / Y Y Y Y
06 / 08 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends Of Lisa Brown	Transaction ID: BA4EDB9198E724655B6C Date of Disbursement
Mailing Address Po Box 251532	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 7 / 2 0 1 1</div> </div>
City State Zip Code West Bloomfield MI 48325	Amount of Each Disbursement this Period
Purpose of Disbursement Lisa Brown, State House, 39th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Friends of Lisa Posthumus Lyons	Transaction ID: B4B30A48DD67742F4996 Date of Disbursement
Mailing Address 12020 100th Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code Alto MI 49302	Amount of Each Disbursement this Period
Purpose of Disbursement Lisa Posthumus Lyons, State House, 86th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Friends of Marilyn Lane	Transaction ID: B0C88D8D3353E49598FE Date of Disbursement
Mailing Address 16558 Wood Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 9 / 2 0 1 1</div> </div>
City State Zip Code Fraser MI 48026	Amount of Each Disbursement this Period
Purpose of Disbursement Marilyn Lane, State House, 31st District, MI Candidate Name	<div> <div>375.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends Of Mike Kowall	Transaction ID: BF6FCFC147EAB480496B Date of Disbursement
Mailing Address 2333 Cumberland Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code White Lake MI 48383	Amount of Each Disbursement this Period
Purpose of Disbursement Mike Kowall, State Senate, 15th District, MI Candidate Name	<div> <div>1000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>Category/Type</div> </div>
B. Full Name (Last, First, Middle Initial) Friends Of Mike Kowall	Transaction ID: BF586724275FA415CA5C Date of Disbursement
Mailing Address 2333 Cumberland Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 1 / 2 0 1 1</div> </div>
City State Zip Code White Lake MI 48383	Amount of Each Disbursement this Period
Purpose of Disbursement Mike Kowall, State Senate, 15th District, MI Candidate Name	<div> <div>500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>Category/Type</div> </div>
C. Full Name (Last, First, Middle Initial) Friends of Morris Hood	Transaction ID: BE4D7F77AB8F941F2940 Date of Disbursement
Mailing Address 8872 Cloverlawn Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code Detroit MI 48204	Amount of Each Disbursement this Period
Purpose of Disbursement Morris Hood, State Senate, 3rd District, MI Candidate Name	<div> <div>600.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div> <div>Category/Type</div> </div>

SUBTOTAL of Disbursements This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Pat Somerville

Mailing Address PO Box 581

City
New Boston

State
MI

Zip Code
48164

Purpose of Disbursement
Pat Somerville, State House, 23rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B84A98D0BA4794005973

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends of Patrick Colbeck & Our American Heritage

Mailing Address PO Box 871583

City
Canton

State
MI

Zip Code
48187

Purpose of Disbursement
Patrick Colbeck, State Senate, 7th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2014

Transaction ID: BEB060C15FBEC44D6B43

Date of Disbursement

01 / 27 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Friends of Paul Clemente

Mailing Address 2235 Fort Park Blvd

City
Lincoln Park

State
MI

Zip Code
48146

Purpose of Disbursement
Paul Clemente, State House, 14thDist., MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BFAFE5F4538E4474DA24

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends Of Phil Cavanagh

Mailing Address 12126 Centralia

City
Redford

State
MI

Zip Code
48239

Purpose of Disbursement

Phil Cavanagh, State House, 17th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B20E96DB49CAC4E0687E

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Rashida Tlaib

Mailing Address Po Box 9380

City
Detroit

State
MI

Zip Code
48209

Purpose of Disbursement

Rashida Tlaib, State House, 12th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BCB7B089CAFF042DE94A

Date of Disbursement

M M / D D / Y Y Y Y
03 / 16 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Friends of Ray Basham

Mailing Address 12406 Telegraph Road

City
Taylor

State
MI

Zip Code
48180

Purpose of Disbursement

Ray Basham, County Commissioner, Local Candidate, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B3DA89667E5A44740B61

Date of Disbursement

M M / D D / Y Y Y Y
06 / 24 / 2011

Amount of Each Disbursement this Period

625.00

SUBTOTAL of Disbursements This Page (optional)

1625.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends Of Roger Kahn For Senate

Mailing Address Po Box 1627

City
Saginaw

State
MI

Zip Code
48605

Purpose of Disbursement

Roger Kahn, State Senate, 32nd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: B1E125E1710954D87931

Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Roger Kahn For Senate

Mailing Address Po Box 1627

City
Saginaw

State
MI

Zip Code
48605

Purpose of Disbursement

Roger Kahn, State Senate, 32nd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: B85B3F4C0D43B4DB08B4

Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Friends Of Roger Kahn For Senate

Mailing Address Po Box 1627

City
Saginaw

State
MI

Zip Code
48605

Purpose of Disbursement

Roger Kahn, State Senate, 32nd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: BCE6BD253E23442A5A2D

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

6000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends Of Roy Schmidt	Transaction ID: BE2F52ED138A141C293E Date of Disbursement
Mailing Address 1127 Vaness Nw	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 1</div> </div>
City State Zip Code Grand Rapids MI 49504	Amount of Each Disbursement this Period
Purpose of Disbursement Roy Schmidt, State House, 76th District, MI	<div> <div></div> <div>600.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012
B. Full Name (Last, First, Middle Initial) Friends Of Roy Schmidt	Transaction ID: B8E4B6C3C69C44A6E8CE Date of Disbursement
Mailing Address 1127 Vaness Nw	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 6 / 2 0 1 1</div> </div>
City State Zip Code Grand Rapids MI 49504	Amount of Each Disbursement this Period
Purpose of Disbursement Roy Schmidt, State House, 76th District, MI	<div> <div></div> <div>150.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012
C. Full Name (Last, First, Middle Initial) Friends of Rudy Hobbs	Transaction ID: BA4FA873F8167441D905 Date of Disbursement
Mailing Address PO Box 3353	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 4 / 2 0 1 1</div> </div>
City State Zip Code Southfield MI 48037	Amount of Each Disbursement this Period
Purpose of Disbursement Rudy Hobbs, State House, 35th District, MI	<div> <div></div> <div>500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Michigan2012

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Sean McCann

Mailing Address PO Box 50811

City
Kalamazoo

State
MI

Zip Code
49008

Purpose of Disbursement

Sean McCann, State House, 60th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B82634F2E245D486CADE

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Friends Of Wayne Schmidt

Mailing Address Po Box 25

City
Traverse City

State
MI

Zip Code
49685

Purpose of Disbursement

Wayne Schmidt, State House, 104th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BF6601CC64C664A1AB2B

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Friends Of Wayne Schmidt

Mailing Address Po Box 25

City
Traverse City

State
MI

Zip Code
49685

Purpose of Disbursement

Wayne Schmidt, State House, 104th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B2198BE4A92FB4D5D8AC

Date of Disbursement

/ /

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 202 / 223

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends to Elect Bruce R Rendon	Transaction ID: B283642D8670A43E6A30 Date of Disbursement
Mailing Address Post Box 809	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 0 / 2 0 1 1</div> </div>
City State Zip Code Lake City MI 49651	Amount of Each Disbursement this Period
Purpose of Disbursement Bruce Rendon, State House, 103rd District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
B. Full Name (Last, First, Middle Initial) Friends To Elect Dian Slavens	Transaction ID: BF1A2D956919A4302AB0 Date of Disbursement
Mailing Address Po Box 87212	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 1 1</div> </div>
City State Zip Code Canton MI 48187	Amount of Each Disbursement this Period
Purpose of Disbursement Dian Slavens, State House, 21st District, MI Candidate Name	<div> <div>300.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
C. Full Name (Last, First, Middle Initial) Friends To Elect Sharon Tyler	Transaction ID: BE89F7B2AA24D4D96A75 Date of Disbursement
Mailing Address 886 Plym Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 7 / 2 0 1 1</div> </div>
City State Zip Code Niles MI 49120	Amount of Each Disbursement this Period
Purpose of Disbursement Sharon Tyler, State House, 78th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 203 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

George T Darany for State Rep

Mailing Address 17835 Oakwood

City
Dearborn

State
MI

Zip Code
48124

Purpose of Disbursement

George T. Darany, State House, 15th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: BC0590C8634E44EC1A6B

Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Goeff Hansen for Senate

Mailing Address PO Box 167

City
Hart

State
MI

Zip Code
49420

Purpose of Disbursement

Goeff Hansen, State Senate, 34th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: BBB94E72D238342B79AC

Date of Disbursement

01 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Goeff Hansen for Senate

Mailing Address PO Box 167

City
Hart

State
MI

Zip Code
49420

Purpose of Disbursement

Goeff Hansen, State Senate, 34th District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2014

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: BC3932071E3DF40D9A58

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 204 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Goeff Hansen for Senate	Transaction ID: BDFC551FF732348CDBCC Date of Disbursement																				
Mailing Address PO Box 167	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	1												
City Hart State MI Zip Code 49420	Amount of Each Disbursement this Period																				
Purpose of Disbursement Goeff Hansen, State Senate, 34th District, MI Candidate Name	<table border="1"> <tr> <td colspan="10">550.00</td> </tr> </table>	550.00																			
550.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Hammel Leadership Fund	Transaction ID: BAC192D0879A24F05B56 Date of Disbursement																				
Mailing Address Po Box 12073	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	1												
City Lansing State MI Zip Code 48901	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to State Independent PAC Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Other2011 Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Haveman House Fund	Transaction ID: B035F6B6B8EAE4881A5F Date of Disbursement																				
Mailing Address Po Box 457	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	1	1												
City Zeeland State MI Zip Code 49464	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to State Independent PAC Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

2550.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 205 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Hoon-Yung Hopgood for State Senate

Mailing Address 10815 Westlake Street

City State Zip Code
Taylor MI 48180Purpose of Disbursement
Hoon-Yung Hopgood, State Senate, 8th District, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B3C5DEE51DCAF44FD8C1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	1

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
House Republican Campaign Committee

Mailing Address P.o. Box 15035

City State Zip Code
Lansing MI 48901Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Other2011

Transaction ID: BFBD03EEE01C6409B938

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	8	/	2	0	1	1

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
House Republican Campaign Committee

Mailing Address P.o. Box 15035

City State Zip Code
Lansing MI 48901Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Other2011

Transaction ID: B22B384D273B043D9919

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

20000.00

SUBTOTAL of Disbursements This Page (optional)

22000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 206 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Howard Walker for State Senate

Mailing Address PO Box 1508

City Traverse City State MI Zip Code 49685

Purpose of Disbursement
Howard Walker, State Senate, 37th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Transaction ID: BE74662DEBA2F4A0FAFE

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Jeff Irwin for State Rep

Mailing Address 2542 Bellwood

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Jeff Irwin, State House, 53rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BCF090E3F5F7943FFAEE

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Joan Bauer For State Representative

Mailing Address 3105 S. Martin Luther King

City Lansing State MI Zip Code 48910

Purpose of Disbursement
Joan Bauer, State House, 68th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B6D20365297DA4BF6926

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 207 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Joe Hune For State Senate	Transaction ID: B5D7192D1291840D4B6B Date of Disbursement																				
Mailing Address 4849 Hogback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	3		2	0	1	1												
City Fowlerville State MI Zip Code 48836 Purpose of Disbursement Joe Hune, State Senate, 22nd District, MI Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Joe Hune For State Senate	Transaction ID: B2986673644AB4ECE866 Date of Disbursement																				
Mailing Address 4849 Hogback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	1	1												
City Fowlerville State MI Zip Code 48836 Purpose of Disbursement Joe Hune, State Senate, 22nd District, MI Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Joe Hune For State Senate	Transaction ID: B0FEB6C1CC4E944F3A40 Date of Disbursement																				
Mailing Address 4849 Hogback Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	6		2	0	1	1												
City Fowlerville State MI Zip Code 48836 Purpose of Disbursement Joe Hune, State Senate, 22nd District, MI Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joe Hune Leadership Fund

Mailing Address 4849 Hogback Road

City State Zip Code
 Fowlerville MI 48836

Purpose of Disbursement
 Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B586EF769E26042439A0

Date of Disbursement

05 / 06 / 2011

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

John Moolenaar For State Senate

Mailing Address 5915 Eastman Ave
 Ste 100

City State Zip Code
 Midland MI 48640

Purpose of Disbursement
 John Moolenaar, State Senate, 36th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Transaction ID: B27F6630DCD7B4FAFB0C

Date of Disbursement

02 / 10 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

John Olumba for Hope

Mailing Address 18410 Wexford

City State Zip Code
 Detroit MI 48234

Purpose of Disbursement
 John Olumba, State House, 5th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B5540314FBB33498C99E

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 209 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John Proos For State Senate

Mailing Address Po Box 271

City

St. Joseph

State

MI

Zip Code

49085

Purpose of Disbursement

John Proos, State Senate, 21st District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2014

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: BCC0623A56C3F46FFAA8

Date of Disbursement

03 / 24 / 2011

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Judy Emmons for State Senate

Mailing Address 506 E. Carson City Rd

City

Sheridian

State

MI

Zip Code

48884

Purpose of Disbursement

Judy Emmons, State Senate, 33rd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2014

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2014

Transaction ID: B25015C2BAFD74285AF5

Date of Disbursement

04 / 27 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ken Yonker for State Rep

Mailing Address 8300 Patterson Ave SE

City

Caledonia

State

MI

Zip Code

49316

Purpose of Disbursement

Ken Yonker, State House, 72nd District, MI

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☐ Primary

☐ General

☒ Other (specify) ▼

State:

District:

Michigan2012

Transaction ID: B6885E965D5E04A8C973

Date of Disbursement

02 / 23 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth Kurtz for State Rep

Mailing Address 233 W. Pearl St

City State Zip Code
Coldwater MI 49036

Purpose of Disbursement
Ken Kurtz, State House, 58thDist., MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B7D4FC82036AB430F9BA

Date of Disbursement

05 / 18 / 2011

Amount of Each Disbursement this Period

700.00

B.

Full Name (Last, First, Middle Initial)

Kevin Cotter for State Representative

Mailing Address 2767 Eland Ct

City State Zip Code
Mt Pleasant MI 48858

Purpose of Disbursement
Kevin Cotter, State House, 99th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: BC52D8C97AA154AF986D

Date of Disbursement

05 / 03 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Marcia Hovey Wright for State Rep

Mailing Address 452 West Webster Ave

City State Zip Code
Muskegon MI 49440

Purpose of Disbursement
Marcia Hovey-Wright, State House, 92nd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B5C7FA72F5644426A846

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 211 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Mark Meadows For State Representative

Mailing Address P.o. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Mark Meadows, State House, 69th District, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B8DC5830999DB470E8EB

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	1

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Mark Meadows For State Representative

Mailing Address P.o. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Mark Meadows, State House, 69th District, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B2916D63FE98141E4A02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Amount of Each Disbursement this Period

250.00

C. Full Name (Last, First, Middle Initial)
Mark Meadows For State Representative

Mailing Address P.o. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Mark Meadows, State House, 69th District, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BA122665D626F4CDBA00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Marty Knollenberg For State Representati

Mailing Address 198 E. Big Beaver Rd.

City State Zip Code
Troy MI 48083Purpose of Disbursement
Marty Knollenberg, State House, 41st District, MI
Candidate NameCategory/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: B7E737BD2CA8349B3925

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	1	1

Amount of Each Disbursement this Period

300.00

B. Full Name (Last, First, Middle Initial)
Matt Huuki for State Representative

Mailing Address 13895 Rova Road

City State Zip Code
Atlantic Mine MI 49905Purpose of Disbursement
Matt Huuki, State House, 110th District, MI
Candidate NameCategory/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: BE3C58E5F74CD462F972

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Michigan House Democratic Fund

Mailing Address P.o. Box 16193

City State Zip Code
Lansing MI 48909Purpose of Disbursement
Contribution to State PAC
Candidate NameCategory/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
State: District: Michigan2012

Transaction ID: BA60803B11C1943E58FF

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

10800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mike Callton for State Rep

Mailing Address PO Box 676

City State Zip Code
Nashville MI 49073

Purpose of Disbursement
Mike Callton, State House, 87th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B618EC356BFC340DF876

Date of Disbursement

03 / 22 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mitch Lyons for MSU

Mailing Address 190 Monroe
5th Floor

City State Zip Code
Grand Rapids MI 49503

Purpose of Disbursement
Mitch Lyon, Trustee, Michigan State University, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: BDAB22CBABEA94B93ACE

Date of Disbursement

02 / 13 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Moving Michigan Forward

Mailing Address 4025 Timberland Dr SE

City State Zip Code
Grand Rapids MI 49508

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: Michigan2012

Transaction ID: B12600DD09D0E4DFE804

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Nancy Jenkins for State Representative

Mailing Address 9417 W. Carleton Road

City Clayton State MI Zip Code 49235

Purpose of Disbursement
Nancy Jenkins, State House, 57th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B436CE4435C1E4859806

Date of Disbursement

04 / 26 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Paul H Scott for State Representative

Mailing Address PO Box 193

City Grand Blanc State MI Zip Code 48439

Purpose of Disbursement
Paul Scott, State House, 51st District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BADD4D7B78F5142EABEC

Date of Disbursement

01 / 19 / 2011

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Paul Muxlow For State Representative

Mailing Address Box 70

City Brown City State MI Zip Code 48416

Purpose of Disbursement
Paul Muxlow, State House, 83rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B59AB1E002B6F4F0FB62

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Paul Muxlow For State Representative

Mailing Address Box 70

City State Zip Code
Brown City MI 48416

Purpose of Disbursement
Paul Muxlow, State House, 83rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BD389C6D98D5D49B2A6B

Date of Disbursement

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Paul Opsommer For State Representative

Mailing Address 315 E. Main St.

City State Zip Code
Dewitt MI 48820

Purpose of Disbursement
Paul Opsommer, State House, 53rd District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: B29F7A4D59A0C4733B96

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Phil Cavanagh for State Rep

Mailing Address 12126 Centralia

City State Zip Code
Redford Twp MI 48239

Purpose of Disbursement
Phil Cavanagh, State House, 17th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan2012

Transaction ID: BC925D79564384578B7E

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Phil Pavlov for State Senate

Mailing Address 4126 Yankee Road

City
St. Clair

State
MI

Zip Code
48079

Purpose of Disbursement

Phil Pavlov, State Senate, 25th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2014

Transaction ID: B06A1914A4C524B97AB9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Rebekah Warren for State Senate

Mailing Address 234 Eighth Street

City
Ann Arbor

State
MI

Zip Code
48103

Purpose of Disbursement

Rebekah Warren, State Senate, 18th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2014

Transaction ID: B603FE66B3BB34A479CF

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Richardville Leadership Fund

Mailing Address PO Box 1631

City
Monroe

State
MI

Zip Code
48161

Purpose of Disbursement

Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Other2011

Transaction ID: BCB15FCC49F8240BABA3

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Richardsville Leadership Fund	Transaction ID: B265BE4D4ED1549C78AB Date of Disbursement
Mailing Address PO Box 1631	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 1 1</div> </div>
City Monroe State MI Zip Code 48161	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution to State Independent PAC Candidate Name	<div> <div>3000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	
B. Full Name (Last, First, Middle Initial) Rick Jones For State Senate	Transaction ID: B90E19D123E6446CB864 Date of Disbursement
Mailing Address P O Box 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City Grand Ledge State MI Zip Code 48837	Amount of Each Disbursement this Period
Purpose of Disbursement Rick Jones, State Senate, 24th District, MI Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2014	
C. Full Name (Last, First, Middle Initial) Rick Olson - The Voice for the People	Transaction ID: B2E6872FF2E854F40A5E Date of Disbursement
Mailing Address 525 Judd Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 1</div> </div>
City Saline State MI Zip Code 48176	Amount of Each Disbursement this Period
Purpose of Disbursement Rick Olson, State House, 55th District, MI Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012	

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Rick Outman for State Representative

Mailing Address 6481 Miles Road

City Six Lakes State MI Zip Code 48886

Purpose of Disbursement
Rick Outman, State House, 70th District, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BCFAB3957D18345B8BE2

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Robert A. Ficano Committee

Mailing Address Po Box 321123

City Detroit State MI Zip Code 48232

Purpose of Disbursement
Robert Ficano, Wayne County Executive, Local, MI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B7EEB1FC8D4004E2E890

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	1

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Roypac

Mailing Address 1127 Vaness Nw

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: BFEB7ABD9F7BD4A24A19

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Senate Democratic Fund

Mailing Address P.o. Box 111

City
Lansing

State
MI

Zip Code
48909

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Other2011

Transaction ID: B4A20975551A649DD976

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Senate Republican Campaign Committee

Mailing Address 520 Seymour Street
2nd Floor

City
Lansing

State
MI

Zip Code
48933

Purpose of Disbursement
Contribution to State PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B2FAB4FDCB88F46B38DB

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20000.00

C.

Full Name (Last, First, Middle Initial)

Stamas Leadership Pac

Mailing Address 1731 Blue Grass Road

City
Lansing

State
MI

Zip Code
48906

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B895DADAC888C462B83C

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

34000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Stamas Leadership Pac	Transaction ID: BB6DC87BDB4554DA9BBA Date of Disbursement
Mailing Address 1731 Blue Grass Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 8 / 2 0 1 1</div> </div>
City State Zip Code Lansing MI 48906	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution to State Independent PAC Candidate Name	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Taxpayers For Tom McMillin CPA	Transaction ID: B95732E7B8B1D49759DE Date of Disbursement
Mailing Address 1261 Oakwood Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 1 1</div> </div>
City State Zip Code Rochester Hills MI 48307	Amount of Each Disbursement this Period
Purpose of Disbursement Tom McMillin, State House, 45th District, MI Candidate Name	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2012 Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Tom Casperson for State Senate	Transaction ID: B380904F600CF4507BBB Date of Disbursement
Mailing Address PO Box 545	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 1 1</div> </div>
City State Zip Code Escanaba MI 49829	Amount of Each Disbursement this Period
Purpose of Disbursement Tom Casperson, State Senate, 38th District, MI Candidate Name	<div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Michigan2014 Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Tonya Schuitmaker for State Senate

Mailing Address PO Box 1116

City Portage State MI Zip Code 49081

Purpose of Disbursement
Tonya Schuitmaker, State Senate, 20th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Michigan 2014

Transaction ID: BF23AACAA55C094B16912

Date of Disbursement

04 / 27 / 2011

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Tupac Hunter For State Senate

Mailing Address 24461 Pembroke Ave.

City Detroit State MI Zip Code 48219

Purpose of Disbursement
Tupac Hunter, State Senate, 5th District, MI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8153AEF3C6044374A89

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address Internal Revenue Service

City Ogden State UT Zip Code 84201

Purpose of Disbursement
Federal Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: 0

Transaction ID: B8DFF391F3BCC4959B1B

Date of Disbursement

03 / 24 / 2011

Amount of Each Disbursement this Period

407.00

SUBTOTAL of Disbursements This Page (optional)

1907.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Vincent Gregory for Senate	Transaction ID: B2A630C88AAAC43198F8 Date of Disbursement
Mailing Address 29501 Red Leaf Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 9 / 2 0 1 1</div> </div>
City State Zip Code Southfield MI 48076	Amount of Each Disbursement this Period
Purpose of Disbursement Vincent Gregory, State Senate, 14th District, MI	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2014
B. Full Name (Last, First, Middle Initial) Virg Bernero For Lansing	Transaction ID: B9CD32B287C1F438C9B1 Date of Disbursement
Mailing Address 2200 E. Michigan Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 1 / 2 0 1 1</div> </div>
City State Zip Code Lansing MI 48912	Amount of Each Disbursement this Period
Purpose of Disbursement Virg Bernero, Mayor, Local Candidate, MI	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012
C. Full Name (Last, First, Middle Initial) Virg Bernero For Lansing	Transaction ID: B9335015F17384E10A5C Date of Disbursement
Mailing Address 2200 E. Michigan Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 1 / 2 0 1 1</div> </div>
City State Zip Code Lansing MI 48912	Amount of Each Disbursement this Period
Purpose of Disbursement Virg Bernero, Mayor, Local, MI	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Michigan2012

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Whitmer Leadership PAC

Mailing Address PO Box 11063

City
Lansing

State
MI

Zip Code
48901

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B3DA53E1DCA454F629BF

Date of Disbursement

03 / 22 / 2011

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Woodrow Stanley Leadership PAC

Mailing Address PO Box 441

City
Flint

State
MI

Zip Code
48504

Purpose of Disbursement
Contribution to State Independent PAC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Michigan2012

Transaction ID: B3E8A735F974A40FCB10

Date of Disbursement

03 / 23 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

205782.00